

CHILDREN, YOUTH AND FAMILIES (CYF) BEHAVIORAL HEALTH SYSTEM OF CARE COUNCIL

MEETING AGENDA

June 14, 2021 – 9:00-10:30 A.M.

Zoom meeting link sent via Outlook meeting invitation

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| I. Welcome (Suzette Southfox) | 5 minutes |
| II. Review of Meeting Summary (Minola Clark Manson) | 3 minutes |
| <ul style="list-style-type: none"> May 10, 2021 Meeting Summaries-Handouts-Pages 4-9 Action Items from May 10, 2021-See meeting summary for action items-Page 6 | |

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| III. Business Items (Yael Koenig) | 15 minutes |
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Board Letters / Board Actions	
<ul style="list-style-type: none"> May 18, 2021-Item 01: Youth Transition Campus Facility Phased Replacement Project-Certify Mitigated Negative Declaration and Authorize Change Order for Phases 2 & 3-Handout-Pages 10-12 May 18, 2021-Item 07: Authorization to Accept Perinatal Equity Initiative Funding And Authorization to Pursue Future Funding Opportunities For Perinatal Health Equity-Handout-Pages 13-14 May 18, 2021-Item 18: Enhancing Drowning Prevention Opportunities for San Diego County Youth-Handout-Pages 15-16 May 18, 2021-Item 19: Advancing Capital Improvement Needs Assessment Projects in District 3 in Alignment with Community Priorities, Equity, Inclusion, and Youth Development-Handout-Pages 17-19 May 18, 2021-Item 30: Reaffirming Support for San Pasqual Academy and Outlining Immediate Directives-Handout-Pages 20-21 June 8, 2021-Item 03: Approve the Recommended Framework for the Use of American Rescue Plan Act Funding (ARPA), Establish Appropriations to Support Proposed Actions, And Authorize the Auditor & Controller to Establish a Trust Fund for the ARPA and presentation-Handouts-Pages 22-34 June 8, 2021-Item 04: Receive Update on Comprehensive County Substance Use Harm Reduction Strategy, Attachment A, and presentation-Handouts-Pages 35-49 June 8, 2021-Item 10: Framework For the Future: Creating and Office of Immigrant and Refugee Affairs-Handout-Pages 50-52 June 8, 2021-Item 11: Framework For the Future: Strengthening County Service Delivery and Contracting-Handout-Pages 53-56 June 2021 County of San Diego Budget Hearings (June 14, 16, 29, 2021)-Budget presentations and flier-Page 57-66 Link: https://www.sandiegocounty.gov/content/sdc/openbudget.html.html County's Redistricting Commission to Hold Informational Meetings-Handout-Page 67 <p>Link to the Clerk of Board of Supervisors (BOS) Meeting Agendas, Board Letters and Access to the BOS meetings: https://www.sandiegocounty.gov/cob/bosa/index.html</p>	
Information	
<ul style="list-style-type: none"> External Quality Review – California Department of Mental Health Care Services (DHCS) – County document that summarizes the EQRO Recommendations for both the Mental Health and DMC-ODS - Handout-Page 68 <ul style="list-style-type: none"> Mental Health - January 5-7, 2021-Fiscal Year 2020-21 <ul style="list-style-type: none"> External Quality Review Report Summary - Handout-Page 69-70 Full Report - MHP Report Template FY 2020-21 v6 (sandiegocounty.gov) Drug Medi-Cal-Organized Delivery System (DMC-ODS) – March 2-4, 2021- Fiscal Year 2020-21 <ul style="list-style-type: none"> Full Report – https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/TRL/TRL%20Section%206/SAN%20DIEGO_FY%202020-21%20DMC-ODS%20Final%20Report%2005.10.21_suppressed1.pdf Department of Health Care Services (DHCS) Triennial Audit-June 8-10, 2021-Report pending CYF BHS Systemwide Annual Report, Fiscal Year 2019-20: https://medschool.ucsd.edu/som/psychiatry/research/CASRC/resources/SOCE/Documents/CYFBHS%20SOC%20Report%202019-20_FINALv2_with%20appendices.pdf COVID-19 Emergency Rental and Utilities Assistance Program Handout-Page 71 Link: https://www.sandiegocounty.gov/content/sdc/sdhcd/community-development/COVID-19-Emergency-Rental-Assistance-Program.html Healing Opportunities for Personal Empowerment (HOPE) Intensive Treatment program to begin July 2021 (Fran Cooper)-Handout-Page 72 CYF Collaboration with City of San Diego: "Come Play Outside"(Frank Congine)-Handout-Pages 73-78 Rotation of Co-Chair from Private Sector to Education Sector will occur on July 1, 2021 	
BHS System of Care Highlights	
<ul style="list-style-type: none"> BHS programs received National Association of Counties (NACo) Achievement Awards-Handout-Page 79: <ul style="list-style-type: none"> Pathways to Well-Being Virtual Workforce Development Training Series through Responsive Integrated Health Solutions (RIHS) in the category of Information Technology Roaming Outpatient Access Mobile (ROAM) Health Clinic in the category of Health (Indian Health Council for ROAM-North Inland and Southern Indian Health Council for ROAM-East) SchoolLink in the category of Children and Youth recognizing many of the local Community Based Organizations (CBOs) May is Mental Health Month-CYF Annual Celebration hosted by NAMI San Diego can be accessed at: https://www.youtube.com/watch?v=6iZTxe_kdZE&t=7s BOS Chair, Nathan Fletcher presented Proclamation declaring 7th day of May 2021 to be Children's Mental Health Awareness Day-Handout-Pages 80-81 Responsive Integrated Health Solutions (RIHS) 2021 CYF SOC conference link access to attendees (through June 26, 2021): https://whova.com/portal/webapp/ysurr_202105/Agenda/1596986 Christine Frey will be a speaker at the June 18, 2021 California Behavioral Health Planning Council. Meeting information link: June 2021 Quarterly Meeting General Session Agenda (ca.gov) 	
Follow-Up Items	
1. June 14, 2021 CYF Council Hot Topic American Rescue Plan Act of 2021 (ARPA) Discussion	

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| IV. Mental Health Services Act (MHSA) Update (Danyte Mockus-Valenzuela) | 5 minutes |
| V. Hot Topic: ARPA-One time investment to support children, youth, and Families (Minola Clark Manson) | 60 minutes |
| <ul style="list-style-type: none"> Review ARPA presentation to the BOS (Pages 29-34) (Yael Koenig) <ul style="list-style-type: none"> See Fact Sheet and consider Advancing Cultural Responsiveness and Equity document (March 8, 2021) (Page 85)-Handouts-Pages 82-85 (BOS Pages 17-19) Facilitated discussion of needs and priorities-(Fran Cooper and Amanda Lance-Sexton)-Handouts-Pages 86-92 Generate recommendations to BHS Director | |
| VI. Announcements (Suzette Southfox) | 2 minutes |
| <ul style="list-style-type: none"> RIHS presents Neonatal Abstinence Syndrome Webinar on June 24, 2021-Handout-Page 93 July 12, 2021 meeting reserved for the Annual CYF Council Orientation for new Council members, but open to all – Handout-Page 94 | |

Next Executive Committee Conference Call:

Date: June 24, 2021

Time: 9:15-9:45 A.M.

Next Council Meeting:

Date: Monday, July 12, 2021 (Annual Orientation)

Time: 9:00-10:30 A.M.

Sub-Committees/Sectors/Workgroups Meetings Information is located at the end of the meeting summary. For Council materials go to:

https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/mental_health_services_children/CYFBHSCouncil.html

**County of San Diego
Children, Youth and Families Behavioral Health
System of Care Council
Vision, Mission, and Principles**

Council Vision:

Wellness for children, youth and families throughout their lifespan.

Council Mission:

Advance systems and services to ensure that children and youth are healthy, safe, lawful, successful in school and in their transition to adulthood, while living in nurturing homes with families.

Council Principles:

1. **Collaboration of four sectors:** Coordination and shared responsibility between child/youth/family, public agencies, private organizations and education.
2. **Integrated:** Services and supports are coordinated, comprehensive, accessible, and efficient.
3. **Child, Youth, and Family Driven:** Child, youth, and family voice, choice, and lived experience are sought, valued and prioritized in service delivery, program design and policy development.
4. **Individualized:** Services and supports are customized to fit the unique strengths and needs of children, youth and families.
5. **Strength-based:** Services and supports identify and utilize knowledge, skills, and assets of children, youth, families and their community.
6. **Community-based:** Services are accessible to children, youth and families and strengthen their connections to natural supports and local resources.
7. **Outcome driven:** Outcomes are measured and evaluated to monitor progress and to improve services and satisfaction.
8. **Culturally Competent:** Services and supports respect diverse beliefs, identities, cultures, preference, and represent linguistic diversity of those served.
9. **Trauma Informed:** Services and supports recognize the impact of trauma and chronic stress, respond with compassion, and commit to the prevention of re-traumatization and the promotion of self-care, resiliency, and safety.
10. **Persistence:** Goals are achieved through action, coordination and perseverance regardless of challenges and barriers.

May 1, 2018



LIVEWELLSD.ORG



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SAN DIEGO

BEHAVIORAL HEALTH SERVICES CHILDREN, YOUTH & FAMILIES FRAMEWORK

VISION

Children and youth are healthy, safe, lawful, successful in school and in their transition to adulthood, while living in nurturing homes with families.

PRINCIPLES

Collaborative, Integrated, Child, Youth & Family Driven, Individualized, Strength-based, Community-based, Outcome & Data Driven, Culturally Competent, Trauma Informed, Persistence

PRIORITIES

Ensure a full continuum of care through family-centered and youth-informed services that are compassionate and sensitive to the unique developmental needs of children and youth.

Strengthen partnerships with children/youth's circle of influence to create a supportive environment.

Provide services that empower children and youth to build a healthy sense of self and have confidence to make sound decisions so they thrive in an ever-changing world.

Live Well San Diego-Areas of Influence



Standard of Living

- Economic & Nutrition Security
- Timely Access to Healthcare Inclusive of Behavioral Health Services
- Employment Readiness



Community

- Access to Parks, Playgrounds and Recreation Centers
- Usable Transportation
- Safe Neighborhoods & Schools
- Affordable Stable Housing
- Access to Extracurricular Activities

HEALTH FACTORS



Health

- Daily Physical Activity
- Limited & Supervised Screen Time
- Affordable Healthy Food
- Zero Sugary Beverages, Drink More Water
- No Substance Use
- No Tobacco Use
- Up to Date Immunizations
- Connection to a Health Home



Social

- Supportive Families
- Nurturing Communities
- Connection to Natural Supports
- Positive Social Interactions



Knowledge

- Quality Education
- Quality Preschool For All
- Good School Attendance
- School Success
- No Suspensions or Expulsions
- Obtain a High School Diploma
- Access to Higher Education & Vocational Programs³

CHILDREN, YOUTH AND FAMILIES (CYF) BEHAVIORAL HEALTH SYSTEM OF CARE COUNCIL MEETING SUMMARY

May 10, 2021 | 9:00-10:30 A.M.

Virtual Meeting

ITEM	SUMMARY AND ACTION ITEMS
I. Welcome/Introductions (Valerie Hebert) <ul style="list-style-type: none"> May is Mental Health Month – Event Calendar can be accessed at: https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/mimhm_resources.html Please submit planned activities in celebration of May is Mental Health Month to: Nancy.Page@sdcounty.ca.gov for posting Enter events into meeting chat 	<ul style="list-style-type: none"> Valerie Hebert opened the meeting and welcomed meeting attendees.
II. Approval of Meeting Summary (Minola Clark Manson) <ul style="list-style-type: none"> March 8, 2021 Meeting Summary-Handout-Pages 4-7 Action Items from March 8, 2021-See meeting summary for completed action items- Page 5 April 12, 2021 Combined Council Meeting Summary to be reviewed at next Combined Council Meeting 	<ul style="list-style-type: none"> Meeting summary approved through virtual platform process. Action items reviewed by Yael Koenig.
III. Business Items (Yael Koenig) Board Letters <ul style="list-style-type: none"> March 16, 2021-Item 02-Probation Department-Positive Youth Development Training and Professional Services Contract-Handout-Pages 8-10 March 16, 2021-Item 03-Probation-Establishing the Youth Transition Campus-Handout-Pages 11-12 March 16, 2021-Item 04-Probation-Request to Issue a Competitive Solicitation for Residential Treatment Program Services-Handout-Pages 13-14 March 16, 2021-Item 12-Receive Update Regarding San Pasqual Academy and Authorize Request for Extension of Pilot Project-Handout-Pages 15-17 March 16, 2021-Item 15-Literacy Campaign to Increase Access to Books in Low-Income Communities and Communities of Color and Boost Childhood Reading Comprehension and Writing-Handout-Pages 18-19 March 16, 2021-Item 21-Amplifying Systems of Support for Youth Career Readiness and Employment-Handout-Pages 20-21 April 6, 2021-Item 09-Strengthening Mobile Crisis Response Team Program: Additional Funding for Community Education Campaign, North Coastal Service Expansion, and Developing Data Sharing Agreements and Protocols with Law Enforcement and Other Entities, and Engaging Individuals with Lived Experience Through County Advisory Boards-Handout-Pages 22-24 April 6, 2021-Item 10-Increasing Access and Enrollment in County Self-Sufficiency Programs to Serve Every Community Member in Need without Barriers to Entry-Handout-Pages 25-27 April 6, 2021-Item 16-A Resolution Denouncing Xenophobia and Anti-Asian Racism Affirming San Diego County's Commitment to the Well-Being and Safety of Asian Pacific Islander Communities-Handout-Pages 28-29 April 6, 2021-Item 17-Receive the Report Back on the Framework for Creating an Equitable County Government through the Lens of Equity, Racial Justice, and Belonging and Attachment A-Handout-Pages 30-35 April 6, 2021-Item 25-Amending Legislative Program to Support Legislation Related to Background Checks on Firearm Purchases-Handout-Pages 36-37 May 4, 2021-Item 05-Provide Legal Representation to Detained Immigrants Facing Removal Proceedings-Handout-Pages 38-41 May 4, 2021-Item 11-Update on Advancing the Behavioral Health Continuum of Care and attachments-Continued item from 04/06/2021 (11) -Handouts- Pages 42-78 	<ul style="list-style-type: none"> Yael Koenig reviewed Business items.

ITEM	SUMMARY AND ACTION ITEMS
<ul style="list-style-type: none"> May 4, 2021-Item 24-Supporting H.R. 1280, the George Floyd Justice in Policing Act-Handout-Pages 79-80 <p>Link to Board of Supervisors Meeting Agendas: https://www.sandiegocounty.gov/cob/bosa/index.html</p> <p>Information</p> <ul style="list-style-type: none"> April 2021 BHS Director's Report to the Behavioral Health Advisory Board (BHAB)-Handout-Pages 81-86 May 2021 BHS Director's Report to the BHAB-Handout-Pages 87-89 Council Membership Rotation/CYF Council Private Sector Co-Chair Term ends June 30, 2021/Education Sector Co-Chair Term begins July 1, 2021 Supplemental Security Income (SSI) for Children and Families-Handouts-Pages 90-93 California Youth Empowerment Network (CAYEN)-Link: https://ca-yen.org/ (Bill Stewart)-Handout-Page 94 <p>Follow-Up</p> <ol style="list-style-type: none"> 'Beyond the ACE Score' Article introduced by Angela Rowe at the March 8, 2021 CYF Council meeting. Link: -Beyond the ACE score: Examining relationships between timing of developmental adversity, relational health and developmental outcomes in children - Archives of Psychiatric Nursing-Handout-Pages 95-104 ACEs crosswalk has been updated to include Positive Childhood Experiences (PCE) questions -Handout-Pages 105-106 Personal Commitment to Achieve Inclusion and Equity document from March 8, 2021 Council discussion facilitated by Rosa Ana Lozada-Handout-Page 107 Outreach and Engagement During the Pandemic Best Practices-Documents created from the January 11, February 8, and March 8, 2021 CYF Council meetings discussion-Handout-Pages 108-112 	
<p>IV. Mental Health Services Act (MHSA) Update (Dr. Danyte Mockus-Valenzuela)</p>	<ul style="list-style-type: none"> BHS May is Mental Health Month page: https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/mimhm_resources.html More information and a list of upcoming local events is available at the May Is Mental Health Month calendar: https://www.sandiegocounty.gov/content/dam/sdc/hhsa/programs/bhs/pce/calendar.pdf To submit planned activities in celebration of May Is Mental Health Month, please send event information to Nancy Page at: nancy.page@sdcounty.ca.gov.
<p>Hot Topic: Coffee with BHS Director (Minola Clark Manson)</p> <p>Dr. Luke Bergmann's vision for serving children, youth, and families</p> <ul style="list-style-type: none"> Question 1 - What is your vision and plan for CYF SOC to take action to end disparities and racism? Question 2 - Sometimes there is a delay in knowing the true impact of trauma on someone, especially a young child, since symptoms often present themselves months after the traumatic event and after a sense of safety has been established for that child. Knowing this, we anticipate seeing an even greater need for mental health services for young children and their caregivers as school returns to in-person in the fall. What steps and behavioral health resources will be put in place for the most vulnerable in our community, so the impact is not life long? Question 3 - How do you envision the CYF system working towards a population health orientation? Open Discussion. 	<ul style="list-style-type: none"> Dr. Luke Bergmann, BHS Director, discussed the new Population Health Officer and BHS epidemiologist positions, the Community Experience Project, Behavioral Health Equity Index and community based participatory research. He highlighted the American Rescue Plan Act of 2021 (ARPA) and the opportunities it will present for children, youth and families including upcoming work in the school sphere. The upcoming County budget and support for BHS by the Board of Supervisors was discussed. For additional details, see the Highlights from Coffee with the BHS Director, Dr. Luke Bergmann on page 6 of this document.

ITEM	SUMMARY AND ACTION ITEMS
VI. Announcements <ul style="list-style-type: none"> • Input Session for BHS 5-Year Strategic Housing Plan is scheduled for May 14, 2021 from 1:00 to 2:30 P.M.-Handout-Page 113 • Mental Health for All-NAMI Walks-Your Way is scheduled for Saturday, May 22, 2021-Flier-Page 114 • 2021 CYF System of Care Training Academy Annual conference (virtual): Youth Substance Use: Risk, Resilience, Reconnection is scheduled for Thursday, May 27, 2021. Information and Registration at: https://youth-substance-use-risk-resilience-reconnection.eventbrite.com. 	<ul style="list-style-type: none"> • Valerie Hebert reviewed announcements.
VII. Action Items <ol style="list-style-type: none"> 1. Dedicate the June 14, 2021 CYF Council to discuss ARPA and CYF needs and priorities. 	Action Due/Status <ul style="list-style-type: none"> • CYF Executive Sub-Committee and CYF staff will plan and coordinate the discussion.
Next Meeting: Virtual Council Meeting Date: Monday, June 14, 2021 Time: 9:00-10:30 A.M.	

+=Member in Attendance O=Absent E=Excused

CONSTITUENCY		MEMBER	STATUS	ALTERNATE	STATUS
PUBLIC SECTOR					
1	Behavioral Health Advisory Board (BHAB)	Rebecca Hernandez	O	Bill Stewart	+
2	Behavioral Health Services (BHS)	Dr. Laura Vleugels	+	Dr. Charmi Patel	+
3	Public Safety Group/ Probation	Lisa Sawin	O	Chrystal Sweet	O
4	Child Welfare Services (CWS)	Steve Wells	O	Norma Rincon	O
5	HHSA Regions	VACANT		Jennifer Sovay	O
6	Public Health	Dr. Thomas R. Coleman	+	Adrienne Yancey	O
7	Juvenile Court	H. Ana Espana	O	Beth Brown	+
8	First 5 Commission	Alethea Arguilez	O	Dulce Aguilar-Cahue	O
EDUCATION SECTOR					
9	Special Education Local Plan Area (SELPA)	Jamie Tate - Symons	+	Russell Coronado	+
10	Regular Education Pupil Personnel Services	Violeta Mora	+	Heather Nemour	+
11	School Board	Barbara Ryan	+	VACANT	
12	Special Education	Yuka Sakamoto	+	VACANT	
PRIVATE SECTOR					
13	San Diego Regional Center (SDRC) for Developmentally Disabled	Peggie Webb	O	Therese Davis	O
14	Alcohol and Drug Service Provider Association (ADSPA)	Angela Rowe	+	John Laidlaw	O
15	Alcohol and Drug Service Provider Association (ADSPA)	Marisa Varond	+	Claudette Allen Butler	O
16	Mental Health Contractors Association	Julie McPherson	O	Minola Clark Manson	+
17	Mental Health Contractors Association (MHCA)	Laura Beadles	+	Michelle Hogan	O
18	Fee- For-Service (FFS) Network	Dr. Sherry Casper	+	Marcelo A. Podesta	O
19	Managed Care Health Plan	George Scolari	+	Kathleen Lang	+
20	Healthcare/ Pediatrician	Dr. Pradeep Gidwani	+	VACANT	
FAMILY AND YOUTH SECTOR					
21	Family and Youth Liaison	Renee Cookson	+	Valerie Hebert	+
22	Caregiver of child/youth served by the Public Health System	Debbie Dennison	+	Kari Perry	+
23	Youth served by the Public Health System (up to age 26)	Micaela Cunningham	+	VACANT	

24	Youth served by the public health system (up to age 26)	Christine Frey	+	Emma Eldredge	+
SUB-COMMITTEES (Non-voting members unless a member of the Council)					
-	Executive Sub-Committee	Valerie Hebert/ Minola Clark Manson	+/+		
-	Cultural Competence Resource Team (CCRT)	Rosa Ana Lozada	+		
-	CYF CADRE	Julie McPherson/ Marisa Varond	+/+		
-	Early Childhood Sub-Committee	Aisha Pope/Ginger Bial	+/+		
-	Education Sub-Committee	Heather Nemour/Violeta Mora	O/+		
-	Family and Youth as Partners Sub-Committee	Renee Cookson/ Valerie Hebert	O/+		
-	Outcomes Sub-Committee	Emily Trask/Eileen Quinn-O'Malley	O/+		
-	Training Sub-Committee	Rose Woods	+		

Sub-Committees/Sectors/Workgroups Meetings Information:

Due to COVID-19, most of the sub-committees' meetings are occurring virtually

Please reach out to the sector lead or Executive Subcommittee member to obtain location/link

Behavioral Health Advisory Board (BHAB) meeting: Meets the first Thursday of the month from 2:30 to 5:00 P.M.

Outcomes: Meets the first Tuesday of every other month from 11:30 A.M. to 12:30 P.M.

Early Childhood: Meets the second Monday of the month- from 11:00 A.M. to 12:00 P.M.

Education Advisory Ad Hoc: Meets as Needed, next meeting will be in September 2020.

TAY Council: Meets the fourth Wednesday of the month 3:00 to 4:30 P.M.

CYF CADRE: Meets quarterly on the second Thursday of the month from 1:30 to 3:00 P.M.

CYF System of Care Training Academy: Meets on the first Wednesday of the month from 9:00 to 10:00 A.M.

CCRT: Meets the first Friday of the month from 10:00 to 11:30 A.M.

Family and Youth as Partners: Meets every third Thursday of the month from 1:30 to 3:00 P.M.

Private Sector: Ad Hoc/Meets as needed.

CHILDREN, YOUTH AND FAMILIES (CYF) BEHAVIORAL HEALTH SYSTEM OF CARE COUNCIL

MEETING AGENDA-Hot Topic Summary May 10, 2021 – 9:00-10:30 A.M.

Highlights from Coffee with the BHS Director, Dr. Luke Bergmann

- **Question 1 - What is your vision and plan for CYF System of Care to take action to end disparities and racism?**
 - Established Population Health Officer position held by Dr. Nicole Esposito.
 - A team of BHS epidemiologists is developing mechanisms to obtain data outside of BHS to better understand community needs. This effort includes leveraging established relationships inclusive of the University of California, San Diego UCSD Health Services Research Center (HSRC) and Rady Children's Hospital Children and Adolescent Services Research Center (CASRC) and focusing on the development of a Community Experience Project to help create the Behavioral Health Equity Index
 - Support Community Based Participatory Research.
 - Important to invest in well diverse workforce that knows how to use cultural identity as a tool.
- **Question 2 - Sometimes there is a delay in knowing the true impact of trauma on someone, especially a young child, since symptoms often present themselves months after the traumatic event and after a sense of safety has been established for that child. Knowing this, we anticipate seeing an even greater need for mental health services for young children and their caregivers as school returns to in-person in the fall. What steps and behavioral health resources will be put in place for the most vulnerable in our community, so the impact is not life long?**
 - There are a lot of resources in place like the American Rescue Plan Act of 2021 (ARPA), which are one-time investment opportunities. This is a great resource but need to be aware of its limitations. At this point, the County is still exploring how these monies may be spent.
 - The Fiscal Year 2021-22 proposed budget prioritizes support for behavioral health, dedicating almost \$813 million overall, including increases to redesign and enhance programs and services, including the enhancement of crisis stabilization services, and helping ensure behavioral health clients are placed at the correct level of care with intent to reduce emergency room use. The budget also provides support for youth involved in the justice system.
 - Preliminary planning is being conducted to support students in partnerships with schools.
- **Question 3 - How do you envision the CYF system working towards a population health orientation?**
 - Board of Supervisors are very supportive of BHS through strategic investments focused on changing services modality from crisis driven to one centered on continuous coordinated care and prevention. This is naturally inclusive of the 0 – 5 population. These efforts will be guided by data; focused on equity and designed to advance collaboration.

Summary of additional input/next steps:

- ✓ One of the Cultural Competence Resource Team (CCRT) contributions has been the review of the Disparities Report.
- ✓ The County Department of Purchasing and Contracting has developed multiple mechanisms to support entities that need help to provide and support services.
- ✓ County efforts are not expecting to end racism, but very visible changes can be made.
- ✓ More community input can be provided through more focus groups that acknowledge the diversity of the community, including focus groups with youth participation.
- ✓ The June 14, 2021 CYF Council meeting will focus on providing input/recommendations for CYF services using ARPA funds.



COUNTY OF SAN DIEGO

AGENDA ITEM

BOARD OF SUPERVISORS

NORA VARGAS
First District

JOEL ANDERSON
Second District

TERRA LAWSON-REMER
Third District

NATHAN FLETCHER
Fourth District

JIM DESMOND
Fifth District

DATE: May 18, 2021

01

TO: Board of Supervisors

SUBJECT

YOUTH TRANSITION CAMPUS FACILITY PHASED REPLACEMENT PROJECT- CERTIFY MITIGATED NEGATIVE DECLARATION AND AUTHORIZE CHANGE ORDER FOR PHASES 2 & 3 (District: 4)

OVERVIEW

The San Diego County Probation Department (Probation) has been undergoing a transformational process to best serve justice-involved youth and their families. On April 25, 2017 (4) the Board of Supervisors approved Probation to apply for and enter into a technical assistance contract known as the Youth in Custody Practice Model (Practice Model). The Practice Model was co-created by Georgetown University's Center for Juvenile Justice Reform and the Council of Juvenile Justice Administrators to support juvenile correctional agencies with transitioning to a positive youth development model of juvenile detention.

On August 7, 2018 (7), the Board of Supervisors authorized the design and construction of Phase 1 – Urban Camp of the Youth Transition Campus (formerly Juvenile Justice Campus.) As the result of a competitive procurement, Balfour Beatty Construction was awarded a \$111,995,000 design-build contract (# 561250) to construct the Phase 1 – Urban Camp for the San Diego Youth Transition Campus capital project # 1021131. Phase 1 included technical feedback from Practice Model national experts to ensure the project resulted in positive outcomes for youth and staff. On March 16, 2021 (3), the Board of Supervisors approved the naming of the new Youth Transition Campus.

On March 2, 2021 the Department of Purchasing and Contracting posted a Request for Statement of Qualifications (RFSQ) #10756 entitled DESIGN-BUILD PRE-QUALIFICATION FOR PHASE 2 & 3 OF THE COUNTY'S YOUTH TRANSITION CAMPUS, which closed on March 31, 2021. Only one response was received. The response was from Balfour Beatty Construction, who holds the contract for Phase 1 that is currently under construction with most work to be completed in November 2021. Since only one firm responded to and was pre-qualified under the RFSQ, your Board is requested to (1) find that a competitive procurement would be unavailing and produce no public advantage and (2) authorize the Director, Department of Purchasing and Contracting, upon successful negotiations and determination of fair and reasonable pricing, to

SUBJECT: YOUTH TRANSITION CAMPUS FACILITY PHASED REPLACEMENT PROJECT- CERTIFY MITIGATED NEGATIVE DECLARATION AND AUTHORIZE CHANGE ORDER FOR PHASES 2 & 3 (District: 4)

execute a change order to the existing design-build contract with Balfour Beatty Construction to include the work outlined in RFSQ #10756 (Phases 2 & 3.)

RECOMMENDATION(S)

CHIEF ADMINISTRATIVE OFFICER

1. Find that there are no changes in the project or in the circumstances under which it is undertaken which involve significant new environmental impacts which were not considered in the previously adopted Mitigated Negative Declaration dated August 7, 2018, that there is no substantial increase in the severity of previously identified significant effects, and that no new information of substantial importance has become available since the MND was prepared.
2. Find that competitive procurement for the changes to the San Diego Youth Transition Campus Project design-build contract to add the work under RFSQ # 10756 would be unavailing and would not produce any public advantage and that a change order to CONTRACT NUMBER 561250 qualifies as a single source procurement under Board Policy A-87.
3. Authorize the Director, Department of Purchasing and Contracting, upon successful negotiations and determination of fair and reasonable price, to execute a change order to CONTRACT NUMBER 561250 with BALFOUR BEATTY CONSTRUCTION for the design and construction of Phases 2 & 3 of the Youth Transition Campus, pending additional appropriations of \$75,000,000 included in the Fiscal Year 2021-22 CAO Recommended Operational Plan. (4 VOTES)

FISCAL IMPACT

Funds for this request in the amount of \$400,000 are included in the Fiscal Year 2020-21 Justice Facility Construction Fund for Capital Project 1023885, Youth Transition Campus. The funding source is Unassigned General Fund Fund Balance.

Funds in the amount of \$75,000,000 are included in the Fiscal Year 2021-22 CAO Recommended Operational Plan in the Justice Facility Construction Fund for Capital Project 1023885, Youth Transition Campus. The funding sources are Local Revenue Fund Community Corrections Subaccount (\$15,000,000) and Reimbursement from SANCAL (Bond Proceeds) (\$60,000,000). The estimated total project cost of Phases 2 & 3 of the Youth Transition Campus is \$75,400,000.

Phase 1 of the San Diego Youth Transition Campus is fully funded at \$130,180,000. Funding sources are General Fund Balance Committed to Capital Project Funding (\$57,331,000), available prior year Criminal Justice Facility Construction Fund fund balance (\$21,000,000), available prior year General Fund fund balance (\$10,233,269), General Purpose Revenue (\$21,615,731), and available prior year Public Safety General Fund fund balance (\$20,000,000).

Total costs of the entire Youth Transition Campus are estimated at \$205,580,000. Phase 1 is anticipated to be completed in Winter 2022 and Phase 2 & 3 are anticipated to be completed Winter 2024. There will be no change in net General Fund cost and no additional staff years.

SUBJECT: YOUTH TRANSITION CAMPUS FACILITY PHASED REPLACEMENT PROJECT- CERTIFY MITIGATED NEGATIVE DECLARATION AND AUTHORIZE CHANGE ORDER FOR PHASES 2 & 3 (District: 4)

BUSINESS IMPACT STATEMENT

Programming and planning for the Youth Transition Campus Project will support local private sector professional services consultants. Future positive business impact in the Kearny Mesa community could occur through increased business activity generated by the construction of a large, master-planned development on the County properties.

When completed, the Youth Transition Campus project will have resulted in approximately 1,500 construction jobs for private sector contractors and suppliers.

ADVISORY BOARD STATEMENT

N/A

BACKGROUND

The Kearny Mesa Youth Transition Campus (originally Juvenile Hall) complex originally opened in 1954 as a detention and rehabilitation facility for custodial youth. The existing facility includes housing for all juvenile classifications—pre-adjudication and commitments to custody. The Youth Transition Campus also includes facilities for processing juveniles (booking, transfer and release), site and security administration, food service, education, counseling services, laundry/supply, medical services, and recreation. Later, the Probation Department opened the Girls Rehabilitation Facility to house young women committed to the Probation Department's custody. The average daily population on the complex, including the Girls Rehabilitation Facility, in recent years has been approximately 110-150 youth. The current facility has exceeded its life cycle's operating capacity and is in urgent need of replacement.

Youth Transition Campus Project:

On April 25, 2017 (4), the Board of Supervisors approved Probation's request to apply for and receive technical assistance through the Youth in Custody Practice Model (Practice Model). The Practice Model was co-created by Georgetown University's Center for Juvenile Justice Reform and the Council for Juvenile Justice Administrators. Through a collaborative process involving juvenile justice stakeholders, probation management, and direct care staff, leaders evaluated operations to national best practices and identified practice enhancements that best serve youth and staff.

Probation's facilities have historically been limited by correctional designs, large housing units, and remote locations that do not best support positive outcomes for youth and staff. On August 7, 2018 (7), the Board of Supervisors authorized the planning, design and construction of Phase 1 of the Youth Transition Campus (YTC). The YTC included input from national experts with a design that features: small housing units, standalone education, career readiness, robust family visitation, mental health clinicians in housing units, indoor and outdoor recreation, and staff wellness spaces. Phase 1 will complete most construction by November 2021. On March 16, 2021 (3), the Board of Supervisors established a name for the new campus—the Youth Transition Campus to support the juvenile justice system's transformation and focus on supporting youth success and permanent exit from the justice system.

SUBJECT: YOUTH TRANSITION CAMPUS FACILITY PHASED REPLACEMENT PROJECT- CERTIFY MITIGATED NEGATIVE DECLARATION AND AUTHORIZE CHANGE ORDER FOR PHASES 2 & 3 (District: 4)

On March 2, 2021, the Department of Purchasing and Contracting released a Request for Statement of Qualifications (RFSQ) for Phases 2 & 3 of the Youth Transition Campus. Phases 2 & 3 of the proposed project consist of replacing the remaining facility footprint with a new, 72 bed (with an option to increase to a capacity of 96) Temporary Residential Placement Facility (formerly Juvenile Hall) for youth completing the pre-adjudicated court process and will replace the existing KMJDF facility. Similar to Phase 1, the new facility will have a trauma-informed, developmentally appropriate design and include 12-bed living units, standalone education, recreational services, and a new court holding area. Visitation, medical, food, and intake services are included in Phase 1 of the project.

The project will also include the replacement of the existing Juvenile Probation Center (JPC) with a 15,000 square foot administrative building for staff supporting Juvenile Court functions, and administrative staff to vacate current department leases.

The County received only one response to the RFSQ, which was from the Phase 1 contractor, Balfour Beatty Construction. Staff evaluated Balfour Beatty Construction's RFSQ submittal and found the firm to be qualified to perform the work. Since Balfour Beatty Construction is the only firm pre-qualified in accordance with the design-build statutory requirements, no other proposer would be permitted to respond to a Request for Proposals (RFP) for the design and construction of Phases 2 & 3. For this reason, Balfour Beatty Construction qualifies as a single source pursuant to Board Policy A-87 Competitive Procurement.

Additionally, issuing an RFP to which only one firm could respond would be futile. California case law such as *Graydon v. Pasadena Redevelopment Agency*, 104 Cal.App.3d 631 (1980), establishes that competitive bidding is not required where such bidding would be unavailing and impractical, and would not produce any public advantage. In this case, the County attempted a competitive procurement for Phases 2 & 3, but received only a single response. Continuing with a formal RFP process would be fruitless and would not produce any public advantage. To the contrary, it would be in the public's best interest to maximize efficiency and execute a change order to add the design and construction of the remaining phases at the Youth Transition Campus to the existing Phase 1 contract.

Sustainability and Equity

The Youth Transition Campus supports the County's goal of achieving a carbon neutral footprint. Phases 2 & 3, much like Phase 1, includes buildings that operate around-the-clock. However, this project will achieve a LEED Gold Certification and attempt a Zero-Net Energy (ZNE) rating based upon design and architectural features. The justice-involved population has long experienced employment barriers when looking for livable wages and careers. As Probation continually embraces a restorative justice philosophy and supports current and former clients with employment, the project will encourage and establish appropriate hiring and subcontracting goals for construction staff being formerly justice-involved.

Environmental Statement:

The previously adopted Mitigated Negative Declaration, dated August 7, 2018, prepared for the Youth Transition Campus (the "Project") was circulated for public review from April 6, 2018

SUBJECT: YOUTH TRANSITION CAMPUS FACILITY PHASED REPLACEMENT
PROJECT- CERTIFY MITIGATED NEGATIVE DECLARATION AND
AUTHORIZE CHANGE ORDER FOR PHASES 2 & 3 (District: 4)

through May 7, 2018 and April 24, 2018 through May 24, 2018 (Attachment A). The second review period provided clarification in a statement in Section 2.1(9.), Project Description, regarding the total number of parking spaces existing and after Project buildout. The MND analyzed full build-out of the site (i.e., Phases one, two and three). The current proposal would be consistent with the analysis and previously adopted CEQA findings and would not result in new significant environmental impacts or an increase in the severity of previously identified environmental impacts. As such, the previously adopted MND, on file with the Department of General Services, adequately covers today's proposed actions and no further revisions are required.

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

Today's proposed action supports the Building Better Health, Living Safely, and Sustainable Environment/Thriving Strategic Initiative of the County's 2021-2026 Strategic Plan by optimizing public services that build strong and sustainable communities. The facility will provide services to youth encountered by law enforcement and adjudicated by the judicial system to make positive changes in their lives.

Respectfully submitted,



HELEN N. ROBBINS-MEYER
Chief Administrative Officer

ATTACHMENT(S)

N/A



COUNTY OF SAN DIEGO

AGENDA ITEM

BOARD OF SUPERVISORS

NORA VARGAS
First District

JOEL ANDERSON
Second District

TERRA LAWSON-REMER
Third District

NATHAN FLETCHER
Fourth District

JIM DESMOND
Fifth District

DATE: May 18, 2021

07

TO: Board of Supervisors

SUBJECT

AUTHORIZATION TO ACCEPT PERINATAL EQUITY INITIATIVE FUNDING AND AUTHORIZATION TO PURSUE FUTURE FUNDING OPPORTUNITIES FOR PERINATAL HEALTH EQUITY (DISTRICTS: ALL)

OVERVIEW

The San Diego County Board of Supervisors (Board) has authorized the acceptance of California Department of Public Health Maternal, Child, and Adolescent Health Division Title V Maternal and Child Health (MCH) Block Grant funding since 1998. MCH Block Grant funding addresses health disparities in African-American birth outcomes by implementing the Black Infant Health (BIH) Program in San Diego County. The 2018-19 California State Budget Act established the California Perinatal Equity Initiative (PEI) to expand the BIH program. Counties that implement BIH programs were eligible to receive PEI funding, and the County of San Diego received a PEI grant allocation of \$968,620 on November 13, 2019, for the grant period of October 1, 2019 through June 30, 2021.

Today's action requests the Board to approve and authorize the Clerk of the Board, upon receipt, to execute the anticipated PEI grant allocation for the grant period of July 1, 2021 through June 30, 2023, for \$968,620. Authorization is also requested to apply for additional funds to help improve perinatal health equity for San Diego County residents. Today's action supports the *Live Well San Diego* vision by enhancing services provided to families and increasing quality of services to mothers, children, and families, which will result in a healthy, safe, and thriving community.

RECOMMENDATION(S)

CHIEF ADMINISTRATIVE OFFICER

1. Authorize the acceptance of \$968,620 in funds from the California Department of Public Health, Maternal, Child, and Adolescent Health Division for the period of July 1, 2021 through June 30, 2023, for the Perinatal Equity Initiative grant. Authorize the Clerk of the Board, upon receipt, to execute all required grant documents, including any annual extensions, amendments, and/or revisions thereto that do not materially impact or alter the services or funding level.

SUBJECT: AUTHORIZATION TO ACCEPT PERINATAL EQUITY INITIATIVE FUNDING AND AUTHORIZATION TO PURSUE FUTURE FUNDING OPPORTUNITIES FOR PERINATAL HEALTH EQUITY (DISTRICTS: ALL)

2. Authorize the Agency Director, Health and Human Services Agency, to apply for additional funding opportunity announcements, if available, that address improvement of perinatal health equity for San Diego County residents.

FISCAL IMPACT

Funds for this request are included in the Fiscal Year 2021-23 CAO Recommended Operational Plan in the Health and Human Services Agency. If approved, this request will result in costs and revenue of \$484,310 in Fiscal Year 2021-22 and costs and revenue of \$484,310 in Fiscal Year 2022-23. The funding source is the Perinatal Equity Initiative grant from the California Department of Public Health. There will be no change in net General Fund cost and no additional staff years.

BUSINESS IMPACT STATEMENT

N/A

ADVISORY BOARD STATEMENT

The Health Services Advisory Board voted to support the recommendations at its meeting on May 4, 2021.

BACKGROUND

The health and well-being of mothers, infants, and children are important markers of the overall health of a society. Inequities and disparities are serious public health concerns with social and economic implications, such as poor health outcomes and increased healthcare costs. According to the National Center for Health Statistics, African-American infants are more than twice as likely as white infants to die before reaching their first birthday. In San Diego County the statistics are as follows:

- Fetal mortality rates for African Americans are more than double that of whites (2016-2018 fetal mortality rates: 7.0 vs. 3.4 deaths per 1,000 fetal deaths and live births),
- Infant mortality rates for African Americans are nearly triple that of whites (2016-2018 infant mortality rates: 7.5 vs. 2.7 deaths per 1,000 live births),
- African-American infants are more than 50% more likely to be born preterm compared to white infants (11.2% vs. 7.2% in 2017-2019), and
- African-American infants are nearly twice as likely to be born with low birthweight compared to white infants (10.1% vs. 5.4% in 2017-2019).

Designed to address these and other inequities, the County of San Diego Health and Human Services Agency, Public Health Services implements the Black Infant Health (BIH) program. To improve the birth outcomes of African-American infants, the BIH program provides a group-based approach with client-centered management to help develop life skills, learn strategies for reducing stress and build social support among African-American pregnant women. Program outcomes in Fiscal Year 2019-20 included:

SUBJECT: AUTHORIZATION TO ACCEPT PERINATAL EQUITY INITIATIVE FUNDING AND AUTHORIZATION TO PURSUE FUTURE FUNDING OPPORTUNITIES FOR PERINATAL HEALTH EQUITY (DISTRICTS: ALL)

- 100% (104 of 104) of participants received information about the importance of not inducing deliveries before 39 weeks,
- 96% (54 of 56) of singleton infants (non-multiple births) born to women who participated in the BIH program for whom birthweight information was available were of normal birthweight (2,500 grams or more), and
- 93% (53 of 57) of infants-initiated breastfeeding at birth, and 82% (32 of 39) of infants assessed at three months of age were breastfeeding at that time.

The 2018-19 State of California Budget Act legislation established the California Perinatal Equity Initiative (PEI) to address the causes of persistent inequality and identify best practices to deal with disparities in infant mortality. The PEI promotes the use of specific interventions designed to fill gaps in current health departments to promote leadership and coordination for widespread and lasting change in public awareness and in public health and clinical practice. Counties that implement a BIH program were eligible to receive a PEI funding allocation. During Fiscal Years 2021-2023, the PEI program aims to achieve the following outcomes:

- Implementation of an evidence-informed fatherhood intervention that supports engagement of 50 partners during pregnancy and childbearing;
- Implementation of an evidence-informed intervention providing implicit bias training in 60 healthcare provider offices to improve relationships among providers and their African-American pregnant clients, and improve birth outcomes;
- Maintenance of a Community Advisory Board to support the work activities of the PEI program; and
- Maintenance of a public awareness campaign that educates and engages the community in the inequities of birth outcomes and the importance of preconception health.

PEI media services included formative research with African-American women who are pregnant or of child-bearing age, fathers, and health care professionals, to determine campaign designs and messages. The Black Legacy Now media campaign was developed and included a website (<https://blacklegacynowsd.com/>), a Facebook page, and an Instagram page. If funding is approved, the Black Legacy Now campaign, along with the Father2Child II fatherhood program, Implicit Bias Educational Trainings for peripartum healthcare providers and staff, and the active and vocal PEI community advisory board will continue. The PEI program aligns with the Board's January 12, 2021 (8) resolution declaring racism a public health crisis by working to advance equity and raising awareness of poor birth outcomes and inequities among African Americans, and to address the role of bias and racism, particularly in health care settings, in contributing to these birth outcomes. These efforts help reduce disparities in African-American maternal and infant health outcomes and would be worthy of County funding if grant funding was not available.

Today's action requests Board authority to accept \$968,620 in PEI grant funding from the CDPH, Maternal, Child and Adolescent Health Division for the period of July 1, 2021 through June 30, 2023, and authorize the Clerk of the Board, upon receipt, to execute the new two-year grant documents. Authorization is also requested to apply for additional funds to help improve perinatal health equity for San Diego County residents.

SUBJECT: AUTHORIZATION TO ACCEPT PERINATAL EQUITY INITIATIVE FUNDING AND AUTHORIZATION TO PURSUE FUTURE FUNDING OPPORTUNITIES FOR PERINATAL HEALTH EQUITY (DISTRICTS: ALL)

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

Today's proposed actions support the Healthy Families Strategic Initiative in the County of San Diego's 2021-2026 Strategic Plan, as well as the County of San Diego's *Live Well San Diego* vision by ensuring that San Diego County has fully optimized its health service delivery system for mothers, children, and families to be healthy, safe, and thriving.

Respectfully submitted,



HELEN N. ROBBINS-MEYER
Chief Administrative Officer

ATTACHMENT(S)

N/A



COUNTY OF SAN DIEGO

BOARD OF SUPERVISORS

1600 PACIFIC HIGHWAY, ROOM 335, SAN DIEGO, CALIFORNIA 92101-2470

AGENDA ITEM

COUNTY OF SAN DIEGO

2021 MAY 10 AM 10:29

CLERK OF THE BOARD
OF SUPERVISORS

DATE: May 18, 2021

TO: Board of Supervisors

18

SUBJECT

ENHANCING DROWNING PREVENTION OPPORTUNITIES FOR SAN DIEGO COUNTY YOUTH (DISTRICTS: ALL)

OVERVIEW

Swimming is a life skill that is not easily accessible to all residents throughout our communities. According to the Centers for Disease Control (CDC), 79% of children in households with incomes less than \$50,000 have little-to-no swimming ability; This includes 64% of African American, 45% of Hispanic/Latino, and 40% of Caucasian children.

One in five people who die from accidental drownings are children 14 years of age and younger. In California, drowning is a leading cause of injury-related deaths among children under the age of five. For every child who dies from drowning, another five receive emergency department care for nonfatal submersion injuries. More than 50% of drowning victims treated in emergency rooms require hospitalization for nonfatal drownings, however, injuries can include severe brain damage that may result in long-term disabilities such as memory problems, learning disabilities, and permanent loss of basic functioning. Formal swimming lessons reduce the likelihood of childhood drowning by 88%.

During the period from 2014 through 2020, an annual average of 28 residents died due to drowning, 45 residents were hospitalized, and 117 residents were discharged from the emergency department due to drowning or near drowning in San Diego County. Additionally, in 2019, 100 fatal and non-fatal drownings went through Rady Children's Hospital. Addressing this disparity in our region will save lives and help address equity within our many communities by adding opportunities for San Diego County children to learn basic drowning prevention skills.

Today's recommendation directs the Chief Administrative Officer to work with existing partners focused on drowning prevention to develop a drowning prevention outreach campaign in collaboration with First 5 San Diego in support of the *Live Well San Diego* vision for healthy, safe and thriving communities. These efforts will support a grant for up to \$250,000 to an organization

SUBJECT: Enhancing Drowning Prevention Opportunities for San Diego County Youth (DISTRICTS: ALL)

that will administer grant funds to licensed swim programs in the San Diego County, including all municipalities, to teach underserved children basic drowning prevention skills and swimming lessons in San Diego County.

RECOMMENDATION(S)

SUPERVISOR JIM DESMOND AND SUPERVISOR NORA VARGAS

1. Direct the Chief Administrative Officer to work with existing partners focused on drowning prevention to develop a water safety media outreach campaign, in collaboration with First 5 San Diego in support of the *Live Well San Diego* vision to encourage water safety by educating and informing parents on drowning prevention protocols.
2. Direct the Chief Administrative Officer to develop partnership opportunities with relevant organizations by administering grants for swimming lessons and drowning prevention skills for underserved children up to \$250,000. Additionally, define the criteria for underserved children using the California Healthy Places Index, communities falling in the fourth quartile (Health Equity Quartile).
3. Direct the Chief Administrative Officer to conduct an assessment on incidences of drowning throughout San Diego County and the current resources available to prevent drowning to ensure that resources reflect the need.

FISCAL IMPACT

Funds for this request are included in the Fiscal Year 2021-22 CAO Recommended Operational Plan in Health and Human Services Agency. If approved, this request will result in estimated costs and revenue of up to \$500,000, including grants for swimming lessons and drowning prevention skills, as well as other media outreach and education campaign costs as necessary. The funding source is available prior year General Fund fund balance. There will be no additional staff years.

BUSINESS IMPACT STATEMENT

N/A

ADVISORY BOARD STATEMENT

N/A

BACKGROUND

Children's accessibility to water in San Diego County is high with 70 miles of coastline, 20 freshwater lakes, 7,466 public permitted bodies of water such as apartment complex swimming pools and many backyard pools. In 2018 there were 47 drowning deaths, 55 hospital discharge for near drowning and 87 emergency department discharges for near drownings in San Diego County. Additionally, in 2019, 100 fatal and non-fatal drownings went through Rady Children's Hospital.

This action seeks to partner with organizations to save lives by providing grants to fund swim lessons for underserved youth and providing aquatic safety education for all.

SUBJECT: Enhancing Drowning Prevention Opportunities for San Diego County Youth
(DISTRICTS: ALL)

Additionally, this request will develop a “Water Safety and Drowning Prevention” outreach campaign to encourage water safety by educating and informing parents on drowning prevention protocols.

As an example, in 2019, the Prevent Drowning Foundation of San Diego provided grants that taught 5,121 underserved children how to swim and basic drowning prevention skills to school districts including San Diego Unified School District, National School District, King Chavez Neighborhood of Schools and High-Tech High Charter Schools. Additionally, grants were provided to Barrio Station Pool, City of San Diego (general lessons, Portable Pools swimming lessons and Parent and Toddler Workshops), City of San Diego Portable Pools City of San Diego Parent and Toddler Workshops, City of Chula Vista, City of National City, City of El Cajon, YMCA of Greater San Diego, Boys and Girls Club Solana Beach, Ocean Discovery, Outdoor Outreach, Face in Water, Autism Tree Foundation, Autism Society of San Diego, Refugee Network, La Maestra, Bridge of Hope, Episcopal Refugee Network, Out of the Boat, Star/Pal, City Heights Village Townhomes and City Heights Square.

The Prevent Drowning Foundation of San Diego believes drowning is preventable and it is their vision to teach every child in San Diego how to swim. Since 2009, their purpose has been simple, they do everything they can to prevent drowning and save lives of children by targeting underserved communities that need swim lessons and aquatic water and ocean safety education. With local schools, community, and aquatic partners, they have impacted tens of thousands of young people in San Diego County and made their lives safer and more enjoyable.

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

Today’s proposed action supports the Safe Communities initiative of the County of San Diego’s 2021-2026 Strategic Plan by creating a water safety outreach campaign and providing drowning prevention opportunities for San Diego County youth.

Respectfully submitted,



JIM DESMOND
Supervisor, 5th District



NORA VARGAS
Supervisor, 1st District

ATTACHMENT(S)

N/A



TERRA LAWSON-REMER
SUPERVISOR, THIRD DISTRICT
SAN DIEGO COUNTY BOARD OF SUPERVISORS

COUNTY OF SAN DIEGO
2021 MAY 10 AM 11:31
CLERK OF THE BOARD
OF SUPERVISORS

AGENDA ITEM

DATE: May 18, 2021

TO: Board of Supervisors

19

SUBJECT

ADVANCING CAPITAL IMPROVEMENT NEEDS ASSESSMENT PROJECTS IN DISTRICT 3 IN ALIGNMENT WITH COMMUNITY PRIORITIES, EQUITY, INCLUSION, AND YOUTH DEVELOPMENT (DISTRICT 3)

OVERVIEW

On March 16, 2021, the Board of Supervisors unanimously approved Item 24; Aligning Capital Improvements Needs Assessment Projects in District 3 with Community Priorities, Equity, Inclusion, and Youth Development. This item identified several high-priority capital projects and community investments that would advance equity, inclusion, youth development, and arts and educational opportunities in the communities throughout District 3. The identified projects directly addressed long-standing and immediate community needs in racially and culturally diverse neighborhoods.

The item also directed the Chief Administrative Officer to pause implementation of two capital projects in District 3, including Capital Project 1023734, a project in District 3 that would acquire property for a program modeled after The Other Side Academy, and Capital Project 1023275, a project in District 3 that would acquire property to house operations for the organization Saved In America. Residents have expressed concern about both these projects, specifically their alignment with demonstrated community needs, and their alignment with equity, inclusion, and youth opportunity priorities.

Finally, the item directed County staff to conduct due diligence on the shortlist of alternative local projects and community investments that had been identified through community and stakeholder engagement. On May 3, 2021 County staff sent a memo to the Board of Supervisors detailing the results of their due diligence. Based on the results of this rigorous staff evaluation, today's item recommends redirecting the previously paused capital appropriations to advance a shortlist of capital projects and community investments that are more aligned with local District 3 needs and priorities and advance equity, youth opportunity, and recreational facility deficits in diverse communities.

SUBJECT: ADVANCING CAPITAL IMPROVEMENT NEEDS ASSESSMENT PROJECTS IN DISTRICT 3 IN ALIGNMENT WITH COMMUNITY PRIORITIES, EQUITY, INCLUSION, AND YOUTH DEVELOPMENT

I urge my colleagues to join me in supporting this proposal.

RECOMMENDATION(S)

SUPERVISOR TERRA LAWSON-REMER

1. Direct the Chief Administrative Officer to cancel appropriations and related revenue of \$16,773,420.29 in the Capital Outlay Fund for Capital Project 1023734 Innovative Residential Rehabilitation Program (\$14,792,818.64) and Capital Project 1023275 Safe Shelter Group Home (\$1,980,601.65).
2. Direct the Chief Administrative Officer to establish appropriations totaling \$16,773,420 as follows:
 - a) Establish appropriation of \$3,650,000 in the Capital Outlay Fund to support the redevelopment of the Mira Mesa Youth and Community Center based on an Operating Transfer In from the General Fund. **(4 VOTES)**
 - b) Establish appropriations of \$715,000 in the Capital Outlay Fund to support the Los Peñasquitos Ranch Preserve based on an Operating Transfer In from the General Fund. **(4 VOTES)**
 - c) Transfer appropriations of \$3,000,000 within Finance-Other from Contribution to Capital Outlay Fund, Operating Transfers Out, to General Miscellaneous Expense, Other Charges, to support the redevelopment of a property in Escondido for a recuperative care/medical respite bed facility to provide recuperative care and temporary housing for individuals who are homeless or unstably housed.
 - d) Transfer appropriations of \$3,500,000 within Finance-Other from Contribution to Capital Outlay Fund, Operating Transfers Out, to General Miscellaneous Expense, Other Charges to support the replacement of the Camino Del Mar Bridge.
 - e) Transfer appropriations of \$1,980,000 within the Finance-Other from Contribution to Capital Outlay Fund, Operating Transfers Out, to General Miscellaneous Expense, Other Charges to support play structure and ballfield equipment replacement in Escondido.
 - f) Establish appropriations of \$3,928,420 in the Library Projects Fund to support the expansion of the 4S Ranch Library based on an Operating Transfer In from the General Fund. Include the remaining estimated construction costs in FY 2022-26 five-year plan within the Capital Improvements Needs Assessment. **(4 VOTES)**

FISCAL IMPACT

Funds for these requests are not included in the Fiscal Year 2020-21 Operational Plan. If approved, these requests will eventually result in one-time costs of an estimated \$19,895,000-\$22,895,000 based on Unassigned General Fund fund balance, \$16,773,420 of which would be made available in the current year through the cancellation of existing capital projects mentioned above. Ongoing costs of an estimated \$705,000 will be based on General Purpose Revenue and

SUBJECT: ADVANCING CAPITAL IMPROVEMENT NEEDS ASSESSMENT
PROJECTS IN DISTRICT 3 IN ALIGNMENT WITH COMMUNITY
PRIORITIES, EQUITY, INCLUSION, AND YOUTH DEVELOPMENT

County Library Fund program revenue. There may be a change in net General Fund cost of at least \$500,000, and at least one additional staff year.

BUSINESS IMPACT STATEMENT
N/A

ADVISORY BOARD STATEMENT
N/A

BACKGROUND

On March 16, 2021, the Board of Supervisors approved Item 24: Aligning Capital Improvements Needs Assessment Projects in District 3 with Community Priorities, Equity, Inclusion, and Youth Development. This item identified several high-priority capital projects and community investments that would advance equity, inclusion, youth development, and arts and educational opportunities in the communities throughout District 3. The identified projects directly addressed long-standing and immediate community needs in racially and culturally diverse neighborhoods.

The item also directed the Chief Administrative Officer to pause implementation of two capital projects in District 3, including Capital Project 1023734, a project in District 3 that would acquire property for a program modeled after The Other Side Academy, and Capital Project 1023275, a project in District 3 that would acquire property to house operations for the organization Saved In America. Residents have expressed concern about both these projects, specifically their alignment with demonstrated community needs, and their alignment with equity, inclusion, and youth opportunity priorities.

Finally, the item directed County staff to conduct due diligence on the shortlist of alternative local projects and community investments that had been identified through community and stakeholder engagement as better aligned with local District 3 needs and priorities and advancing youth opportunity and recreational facility deficits in diverse communities. On May 3, 2021 County staff sent a memo to the Board of Supervisors detailing the results of their due diligence. Based on the results of this rigorous staff evaluation, today's item recommends redirecting the previously paused capital appropriations in order to advance the following capital projects and community investments:

1. **Mira Mesa Epicentre Youth and Community Center:** this youth and teen focused arts and community center has been vacant since 2016 despite its ideal location across from Mira Mesa High School in a community with a growing population and a demonstrated recreational facility deficit. Mira Mesa has been identified by County staff as a target community for additional teen programming, like the Safe Destination Nights program, but this effort has been challenged by the shortage in appropriate facility space. Staff identified this site as the ideal location for additional programming due to its proximity to youth crime and high school dropout rates. Additionally, 87% of Mira Mesa High Schools students list

SUBJECT: ADVANCING CAPITAL IMPROVEMENT NEEDS ASSESSMENT
PROJECTS IN DISTRICT 3 IN ALIGNMENT WITH COMMUNITY
PRIORITIES, EQUITY, INCLUSION, AND YOUTH DEVELOPMENT

themselves in a minority group, and 44% of the student populations are in an economically underserved family. This project will reactivate a critically important community and public space and improve youth services, access to opportunity, and public safety in the community. Acquisition and/or renovation of the Epicentre would allow the 8,000 SF community center to finally be reopened with a variety of youth-focused programming.

2. **Los Peñasquitos Ranch Preserve:** this area is one of the most heavily utilized recreational spaces in the Mira Mesa/Rancho Peñasquitos communities and is enjoyed by residents across the County. Development of an outdoor amphitheater would allow for increased educational programming, and the creation of trail bridges would allow for greater equity and accessibility for all County residents to utilize the trails and creek crossings.
3. **Recuperative Care/Medical Respite Bed Facility:** the formerly vacant motel at 555 Centre City Parkway is proposed for redevelopment into 54 post-hospitalization recuperative care beds that bridge the gap between hospital discharge and full recovery, providing housing, case management, and wrap-around services. There is a critical shortfall in recuperative care beds across the County, with fewer than 75 recuperative care beds compared to over 7,000 hospital beds.
4. **Camino Del Mar Bridge Replacement:** The Camino Del Mar Bridge (Bridge) over the San Dieguito River is structurally deficient, scour critical (foundation erosion), seismically and flood vulnerable, and hydraulically disruptive. The Project qualified for the Caltrans Eligible Bridge List and is eligible for 88.5% reimbursement from the Federal Highway Bridge Program with Caltrans oversight and approval.

The Bridge was built in 1932, widened in 1953, modified in 2001, and is at or beyond its planned life span. The Bridge has been widened and received incremental maintenance, but the harsh aquatic environments has resulted in delamination/deterioration of the concrete at multiple locations. Additional rehabilitation strategies were evaluated following extensive technical studies, including a retrofit plan, but that plan would require replacing most of the individual bridge elements at a greater overall cost. The new bridge will add bike lanes and sidewalks on both sides of the structure and will reduce impacts to the environmentally-fragile wetland and improve the hydrology of the San Dieguito River.

5. **Play Structure and Ballfield Equipment Replacement at Multiple Park Locations in Escondido:** replacement of permanent play equipment that has exceeded its life span and is beyond the product life of replacement parts, including swings, slides, shade equipment, ballfield fence replacement, as well as smart irrigation controller replacements.
6. **4S Ranch Library Expansion:** the 4S Ranch facility has the highest circulation per square foot of any County library and serves a broad geographic and demographic clientele including the communities of 4S Ranch, Rancho Peñasquitos, and Black Mountain. The

SUBJECT: ADVANCING CAPITAL IMPROVEMENT NEEDS ASSESSMENT
PROJECTS IN DISTRICT 3 IN ALIGNMENT WITH COMMUNITY
PRIORITIES, EQUITY, INCLUSION, AND YOUTH DEVELOPMENT

proposed expansion of a 2,000 SF community room would allow for cultural events and educational programming that cannot be accommodated in the existing facility. Cultural events like the Diwali celebration attract over 300 residents and currently can only be housed in the parking lot.

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

The requested action supports the Strategic Initiatives of Building Better Health, Living Safely, Sustainable Environments/Thriving and Operational Excellence, in the County of San Diego's 2020-2025 Strategic Plan. These projects help ensure that neighborhoods are safe for residents to live, work and play; support environments that foster viable, livable communities while bolstering economic growth; make it easier for residents to lead healthy lives while improving opportunities for children and adults; and provide the essential infrastructure to ensure superior delivery of services to our residents.

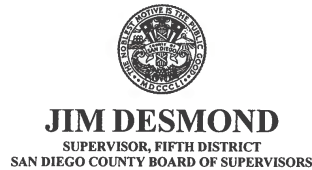
Respectfully submitted,

A handwritten signature in black ink, appearing to read 'Terra Lawson-Remer', with a stylized flourish at the end.

TERRA LAWSON-REMER
Supervisor, Third District

ATTACHMENT(S)

N/A



AGENDA ITEM

COUNTY OF SAN DIEGO
2021 MAY 14 AM 8:06
CLERK OF THE BOARD
OF SUPERVISORS

DATE: May 18, 2021

TO: Board of Supervisors

SUBJECT

REAFFIRMING SUPPORT FOR SAN PASQUAL ACADEMY AND OUTLINING
IMMEDIATE DIRECTIVES (DISTRICTS: ALL)

OVERVIEW

On March 16, 2021 (12), the San Diego County Board of Supervisors unanimously voted to direct staff to request an extension from the California Department of Social Services (CDSS) for the current Memorandum of Understanding (MOU) for San Pasqual Academy (SPA) through June 30, 2022.

It also directed the Chief Administrative Officer and the Child Welfare Services Director to take every possible action with State and Federal officials to gain a permanent licensing carve out for SPA and to enlist former foster youth, the parents advisory board, service providers and others to consider all options for the future of SPA.

On March 24, 2021, Health and Human Services Director (HHSA) Nick Macchione sent a request to CDSS Director Kim Johnson to extend the MOU through June 30, 2022, to allow the County and CDSS to continue to work with all stakeholders to consider options for the Academy and to ensure a supportive and trauma-informed plan for its students.

On May 3, 2021, CDSS responded to the County of San Diego stating they were willing to grant the requested extension subject to four conditions:

1. The County shall not make new residential placements of foster youth at the SPA upon acceptance of this amendment to the MOU.
2. The County must confirm that required child and family team meeting(s) are occurring for each youth in placement at SPA to assist with the transition planning; specifically, reporting on the status of family finding, engagement and support and permanency

SUBJECT: REAFFIRMING SUPPORT FOR SAN PASQUAL ACADEMY AND
OUTLINING IMMEDIATE DIRECTIVES (DISTRICTS: ALL)

planning. The County should consult with each youth's counsel in this planning, and ensure the youth has access to their counsel.

3. The County must arrange for an independent third-party to engage with all youth currently in placement, other stakeholders, dependency counsel, and the courts to obtain an objective assessment of the youth's experiences.
4. The County must schedule a status update with Angie Schwartz, Children and Family Services Division Deputy Director, every two weeks regarding the transition plans for all youth in placement, that must include a discussion of long-term and transformative plans for the program and/or the facility, if the intended use will serve foster youth or families involved with the child welfare system.

The County of San Diego must accept these conditions and respond back by May 28, 2021 for the June 2022 extension to be granted.

The four conditions outlined above are of tremendous concern to SPA stakeholders, which includes clinicians, former foster youth and community advocates.

Today's recommendation directs the Chief Administrative Officer not to agree to the above terms until May 28, 2021 and in the interim continue a dialogue with State and Federal officials to explore a licensing and funding carve out to keep SPA permanently operating.

RECOMMENDATIONS

SUPERVISOR JIM DESMOND

Direct the Chief Administrative Officer to continue seeking a permanent solution to keep San Pasqual Academy viable; and

1. Request an additional 30 days from California Department of Social Services (CDSS) to continue discussions regarding the requirements in the extension.
2. If the additional time is not granted, wait until May 28, 2021 to agree to the terms and continue a dialogue with the California Department of Social Services (CDSS) on ways to allow San Pasqual Academy (SPA) to continue operations until June 30, 2022 and allow for additional flexibility in placing new students, such as siblings, while other licensing waivers and exemptions are being explored.
3. Engage with President Biden's Administration and Federal office holders to seek opportunities for federal funds to be used for the continued operation of SPA and advocate for these actions in accordance with Board Policy M2.

SUBJECT: REAFFIRMING SUPPORT FOR SAN PASQUAL ACADEMY AND OUTLINING IMMEDIATE DIRECTIVES (DISTRICTS: ALL)

4. Engage with Governor Newsom's Administration and State office holders to allow San Pasqual Academy to continue operations under the current MOU until June 30, 2022, while alternative long-term solutions are pursued and advocate for these actions in accordance with Board Policy M2.
5. Direct the Chief Administrative Officer to have appropriate staff available to meet with all interested San Pasqual partners including San Pasqual staff, New Alternatives, San Diego County Office of Education and Workforce Partnership on ways to expand use of the San Pasqual campus.
6. Direct the Chief Administrative Officer to explore using existing detached single-family homes on the campus as foster homes for the placement of sibling groups including children under the age of 12 at San Pasqual Academy.
7. Direct the CAO to add to the 2021 Legislative Program Sponsorship Proposals and item to seek legislation to amend State law that would allow San Pasqual Academy to continue operation in its current form in perpetuity.
8. Report back on the progress of items 1 and 2 to the Board of Supervisors (BOS) by May 28, 2021, and report back on all progress quarterly or more frequently as needed.

FISCAL IMPACT

There is no fiscal impact regarding this action.

BUSINESS IMPACT STATEMENT

N/A

ADVISORY BOARD STATEMENT

N/A

BACKGROUND

San Pasqual Academy (SPA) opened in 2001 and is a first-in-the-nation residential education campus designed to meet the unique needs of adolescent youth in the foster care system and to prepare them for self-sufficiency upon exiting care. Through a unique partnership of public and private agencies such as New Alternatives, Inc., San Diego County Office of Education, Access Inc. and through the support of the San Diego Workforce Partnership, and the County of San Diego (County) Health and Human Services Agency, Child Welfare Services (CWS), youth are provided with a seamless delivery of residential, education, work readiness and child welfare case management services.

Federal and State legislation have changed the statutory requirements in favor of keeping children safely with families. In 2015, Assembly Bill 403, Continuum of Care Reform Act (CCR) was

SUBJECT: REAFFIRMING SUPPORT FOR SAN PASQUAL ACADEMY AND OUTLINING IMMEDIATE DIRECTIVES (DISTRICTS: ALL)

signed into law with an emphasis that supports keeping children with their families. AB 403 also put congregate care settings into a new licensing category, Short-Term Residential Therapeutic Programs (STRTPs), with a duration of no longer than six months.

AB 403, included language to help preserve SPA and recognizes that the program, though licensed as a group home, was built around a residential education environment that promotes independence and self-sufficiency while focusing on completing high school, preparing for the world of work, practicing independent living skills, and developing relational permanency. As a result of multiple discussions on how to preserve SPA's unique program as permitted through the parameters of CCR, an updated Program Statement for a three-year Pilot Project for the period of December 1, 2018 through December 31, 2021 was approved by California Department of Social Services (CDSS) on August 17, 2018. Subsequently, a Memorandum of Understanding (MOU #18-6017) between CDSS and the County outlined how SPA will promote the principles of CCR and solidified SPA's on-going operation.

In 2018, the federal Family First Prevention Services Act (FFPSA) was signed into law as part of Public Law (P.L.) 115-123. FFPSA paves the way for a family strengthening, prevention focused infrastructure intended to enhance supportive services for families to help keep children safely at home and reduce the reliance on and use of congregate care.

On February 8, 2021, CWS was notified by CDSS that the SPA three-year Pilot Project would terminate effective October 1, 2021 rather than December 31, 2021. CDSS informed the County that because SPA is not amending its operations and programming to convert to a STRTP or any other licensing category available to youth in foster care, its educationally based residential program is unsustainable for foster care under CCR. As of October 1, 2021, the beginning of the federal fiscal year, there will no longer be federal Title IV-E funding authority to operate SPA. On March 16, 2021 (12) the Board of Supervisors supported funding approximately \$1.4 million in additional realignment funds to cover lost Title IV-E federal funding from October 1, 2021 - June 30, 2022.

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

This action supports, the Building Better Health, Living Safely, and Thriving initiatives in the County of San Diego's 2021-2026 Strategic Plan as well as the County of San Diego's Live Well San Diego vision by providing a continuum of safe and thriving placement options and accelerated permanency to children and youth interaction with child welfare and juvenile justice systems.

Respectfully submitted,



JIM DESMOND
Supervisor, Fifth District



COUNTY OF SAN DIEGO

AGENDA ITEM

BOARD OF SUPERVISORS

NORA VARGAS
First District

JOEL ANDERSON
Second District

TERRA LAWSON-REMER
Third District

NATHAN FLETCHER
Fourth District

JIM DESMOND
Fifth District

DATE: June 8, 2021

03

TO: Board of Supervisors

SUBJECT

APPROVE THE RECOMMENDED FRAMEWORK FOR THE USE OF AMERICAN RESCUE PLAN ACT FUNDING, ESTABLISH APPROPRIATIONS TO SUPPORT PROPOSED ACTIONS, AND AUTHORIZE THE AUDITOR & CONTROLLER TO ESTABLISH A TRUST FUND FOR THE AMERICAN RESCUE PLAN ACT PROGRAM FUNDS (DISTRICTS: ALL)

OVERVIEW

On April 6, 2021 (5), County of San Diego (County) staff presented a proposed American Rescue Plan Act (ARPA) framework that the San Diego County Board of Supervisors (Board) approved “in concept” as the County had not yet received the federal guidelines with necessary details for the use of ARPA funds.

Today a final recommended ARPA Funding framework is being presented for approval. The recommended framework includes input from community workshops, community stakeholders, and input from the Board of Supervisors as well as consideration of the Legislative Analyst’s Office guiding principles for allocating federal recovery funds, the Interim Final Guidelines released by the U.S. Department of Treasury, anticipated future additional federal and State funding, and ongoing and administrative costs related to responding to the COVID-19 emergency and for implementing programs outlined in the ARPA framework.

In total, the County received priority considerations from the Board for various projects and investments that combined, had an unduplicated total amount of \$1.2 billion in the use of ARPA funding, over \$500 million higher than the approved “in-concept” framework and actual funds available.

Today’s item requests the Board take the following actions: approve the components of the recommended framework for the use of ARPA funding as outlined in Attachment A; establish a trust fund for ARPA program funds; and establish appropriations for the framework items. Once finalized, if there are changes to the Interim Final Guidelines or if significant additional federal or State funding is received by the County that materially impacts the recommended framework, staff will return to the Board as appropriate.

SUBJECT: APPROVE THE RECOMMENDED FRAMEWORK FOR THE USE OF AMERICAN RESCUE PLAN ACT FUNDING, ESTABLISH APPROPRIATIONS TO SUPPORT PROPOSED ACTIONS, AND AUTHORIZE THE AUDITOR & CONTROLLER TO ESTABLISH A TRUST FUND FOR THE AMERICAN RESCUE PLAN ACT PROGRAM FUNDS (DISTRICTS: ALL)

Today’s actions support the County’s *Live Well San Diego* vision by strengthening the local food system, helping vulnerable populations with an emphasis on those experiencing homelessness, and supporting local businesses that are providing essential services that increase the well-being of residents during the COVID-19 pandemic.

RECOMMENDATION(S)

CHIEF ADMINISTRATIVE OFFICER

1. Approve the use of American Rescue Plan Act funding for current and ongoing costs related to the COVID-19 response efforts and the post-September 2021 COVID-19 response efforts totaling \$311,500,000; establish appropriations of \$236,500,000 in Health and Human Services Agency, Services and Supplies, for prior and ongoing costs estimated through September 30, 2021 related to the COVID-19 response efforts funded with ARPA revenue; establish appropriations of \$75,000,000 in Finance Other, General Miscellaneous Expense, Other Charges, for future COVID-19 response costs occurring after September 30, 2021 as needed. **(4 VOTES)**
2. Approve the use of American Rescue Plan Act funding for Premium Pay for Government Essential Workers and establish appropriations of \$36,000,000, distributed to various County departments as listed in Attachment D, under Salaries & Benefits, for hazard pay for non-teleworking County employees based on ARPA revenue. **(4 VOTES)**
3. Establish appropriations of \$4,000,000 in Finance Other, General Miscellaneous Expense, Other Charges, for teleworking stipends, based on prior year available General Fund Fund Balance. **(4 VOTES)**
4. Approve the use of American Rescue Plan Act funding for Mental Health Services and establish appropriations of \$30,000,000 in Finance Other, General Miscellaneous Expense, Other Charges. **(4 VOTES)**
5. Approve the use of American Rescue Plan Act funding for Homeless Services and establish appropriations of \$85,000,000 in Health and Human Services Agency, Services and Supplies. **(4 VOTES)**
6. Approve the use of American Rescue Plan Act funding for Food Assistance and establish appropriations of \$20,000,000 in Finance Other, General Miscellaneous Expense, Other Charges. **(4 VOTES)**
7. Approve the use of American Rescue Plan Act funding for Senior & Youth Services and establish appropriations of \$10,000,000 in Finance Other, General Miscellaneous Expense, Other Charges. **(4 VOTES)**
8. Approve the use of American Rescue Plan Act funding for Childcare Subsidies and establish appropriations of \$10,000,000 in Finance Other, General Miscellaneous Expense, Other Charges. **(4 VOTES)**
9. Approve the use of American Rescue Plan Act funding for Direct Stimulus Payments and establish appropriations of \$40,000,000 in Finance Other, General Miscellaneous Expense, Other Charges. **(4 VOTES)**

SUBJECT: APPROVE THE RECOMMENDED FRAMEWORK FOR THE USE OF AMERICAN RESCUE PLAN ACT FUNDING, ESTABLISH APPROPRIATIONS TO SUPPORT PROPOSED ACTIONS, AND AUTHORIZE THE AUDITOR & CONTROLLER TO ESTABLISH A TRUST FUND FOR THE AMERICAN RESCUE PLAN ACT PROGRAM FUNDS (DISTRICTS: ALL)

10. Approve the use of American Rescue Plan Act funding for Legal Services and establish appropriations of \$15,000,000 in Finance Other, General Miscellaneous Expense, Other Charges. **(4 VOTES)**
11. Approve the use of American Rescue Plan Act funding for Small Business and Non-Profit Stimulus Payments and establish appropriations of \$50,000,000 in Finance Other, General Miscellaneous Expense, Other Charges. **(4 VOTES)**
12. Approve the use of American Rescue Plan Act funding for Infrastructure and establish appropriations of \$46,000,000 in Finance Other, General Miscellaneous Expense, Other Charges. **(4 VOTES)**
13. Authorize the Auditor & Controller to establish a trust fund for the American Rescue Plan Act program funds.

EQUITY IMPACT STATEMENT

Today's actions provide the mechanism to present the County's recommended framework for the use of American Rescue Plan Act funding in support of the most vulnerable residents in the county. The COVID-19 pandemic has had a significant impact on the lives of individuals, businesses, and communities across San Diego County. In order to support the most vulnerable, an equity lens and a quantitative and qualitative data-driven approach was used to prioritize and integrate explicit consideration of racial and gender equity in the recommendations to guide the distribution of COVID-19 response and recovery-related federal, State, and local funding and resources.

To continue the County's commitment to transparency and open government and remove traditional barriers to access and participation in government affairs, through community workshops and other community input opportunities, the County of San Diego (County) has been able to obtain critical public input on the use of future federal and State COVID-19 stimulus funding.

FISCAL IMPACT

Funds for these requests are not included in the County of San Diego's Fiscal Year 2020-21 Operational Plan. If approved, the requests will establish appropriations associated with the American Rescue Plan Act (ARPA) Framework components listed in recommendations #1, #2, and recommendations #4 through #12, resulting in total costs of \$653.5 million to cover response costs and future investments available to be spent through December 31, 2026, the end of the ARPA coverage period. The funding sources are \$648.4 million in ARPA funds allocated directly to the County plus estimated interest earnings. In addition, the Fiscal Year 2021-23 CAO Change Letter will also include specific items that were referred to budget by prior Board action.

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Recommendation #3 will result in costs and revenue of \$4.0 million to fund telework stipends. The funding source is prior year available General Fund Fund Balance, as telework stipends are not an ARPA eligible expense according to the Interim Final Guidelines.

While the recommendations referenced will appropriate the entire ARPA Framework in the current fiscal year, funds will be carried forward for use during the approximate five and a half year ARPA coverage period. For the COVID-19 response costs referenced in recommendation #1, it is anticipated that the Health and Human Services Agency (HHSA) will be able to leverage other funding sources in addition to ARPA, including FEMA reimbursements, Third Party revenue, and HHSA grant and administrative funds. These revenue sources will be closely monitored, and the ARPA appropriations that carry forward to Fiscal Year 2021-22 will be adjusted as needed to reflect the distribution of ARPA funds needed for response costs between the two fiscal years. Additionally, most of the remaining ARPA Framework items will be appropriated centrally in Finance Other and carried forward to future fiscal years, to allow for a transfer of appropriations to the most appropriate operating departments as programs are established during the ARPA coverage period.

Also of note, the Governor's May Revise has prioritized billions of dollars for programs contained within the recommended ARPA framework, including investments in childcare, direct payments to individuals and families, homeless services, and behavioral health services. In addition, the federal government is likely to pass legislation allocating billions, and potentially trillions for investments in infrastructure including broadband. These future funding opportunities will need to be considered with any approved ARPA framework, with the recognition that some of the program details outlined in the various components of the framework will need to be reevaluated when these additional funding resources become available. Appropriating the funds centrally at the outset will allow for adequate time to evaluate the impact of future funding sources prior to moving funds to operating departments.

BUSINESS IMPACT STATEMENT

This action will help support individuals, families and small businesses impacted by COVID-19.

ADVISORY BOARD STATEMENT

N/A

BACKGROUND

A novel coronavirus (COVID-19) was detected in Wuhan City, Hubei Province in China in December 2019. Since then, the virus has rapidly spread across the globe, resulting in the World Health Organization (WHO) declaring COVID-19 a pandemic on March 11, 2020. On February 14, 2020, the San Diego County Public Health Officer issued a Declaration of Local Health Emergency, pursuant to California Health and Safety Code Section 101080. Additionally, on that

SUBJECT: APPROVE THE RECOMMENDED FRAMEWORK FOR THE USE OF AMERICAN RESCUE PLAN ACT FUNDING, ESTABLISH APPROPRIATIONS TO SUPPORT PROPOSED ACTIONS, AND AUTHORIZE THE AUDITOR & CONTROLLER TO ESTABLISH A TRUST FUND FOR THE AMERICAN RESCUE PLAN ACT PROGRAM FUNDS (DISTRICTS: ALL)

day, pursuant to California Government Code 8630, the Chief Administrative Officer (CAO), serving as the County of San Diego (County) Director of Emergency Services and as the Coordinator of the Unified San Diego County Emergency Services Organization, issued a Proclamation of Local Emergency regarding COVID-19.

The County has secured past federal and State stimulus funds to use toward our COVID-19 response efforts, however, additional resources are still required to support the County's efforts toward addressing the COVID-19 pandemic and protecting the needs of vulnerable populations and local businesses throughout the San Diego region. In anticipation of receipt of the future federal and State stimulus funds, on March 2, 2021 (6), the San Diego County Board of Supervisors (Board) directed the Chief Administrative Officer to return to the Board with a framework for the use of these funds toward the County's COVID-19 pandemic response efforts. On March 11, 2021, President Biden signed into law the American Rescue Plan Act of 2021 (ARPA) which established the Fiscal Recovery Funds intended to provide support to State, local, and Tribal Nations for additional relief in addressing the continued impact of the COVID-19 pandemic. The County was allocated \$648.4 million in ARPA funds and received the first installment of \$324.2 million on May 19, 2021.

At the request of the Board, the County hosted five virtual ninety-minute community workshops between March 15th and March 19th that gave the public the opportunity to provide feedback on the potential uses of anticipated funds under ARPA. A total of 386 individuals from across the County participated and arrangements were made to provide interpretation in Arabic, Chinese, Filipino, Spanish, and Vietnamese. Based on categories identified in ARPA, participants were able to engage with an online polling feature within the virtual meeting and rank the categories in order from highest priority to lowest and provide suggestions on the use of the funds.

On April 6, 2021 (5), County staff presented a proposed ARPA framework that the Board approved "in concept" as the County had not yet received the federal guidelines with necessary details for the use of ARPA funds. The following table is the approved "in-concept" framework which incorporated input from Community Workshops.

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Board of Supervisors Approved "In-Concept" Framework April 6, 2021 (5)

Components	Total (in millions)	ARPA (in millions)	Other Funding
Prior & Ongoing Response Costs	\$391.7	\$232.5	\$159.2
Food Assistance	\$87.4	\$20.0	\$67.4
Mental Health Services	\$30.0	\$30.0	-
Rental Assistance	\$107.0	-	\$107.0
Senior & Youth Services	\$10.0	\$10.0	
Childcare Subsidies	\$10.0	\$10.0	
Small Business Stimulus Payment	\$50.0	\$50.0	
Homeless Services	\$85.0	\$85.0	
Direct Stimulus Payments	\$40.0	\$40.0	
Infrastructure	\$46.0	\$46.0	
Legal Services	\$15.0	\$15.0	
Premium Pay for Government Essential Workers	\$40.0	\$40.0	
Family Leave/FFCRA	\$9.0	-	\$9.0
Total Initial Use of Funds	\$921.1	\$578.5	\$342.6
09/21 – 12/22 Health/Economic Recovery	\$75.0	\$75.0	
Grand Total	\$996.1	\$653.5	\$342.6

Today's action is seeking the Board's final approval on the ARPA funding framework.

ARPA Funding Framework Considerations

When deliberating the use of approximately \$650 million of ARPA funds, there are several foundational factors to consider. Below are considerations to provide guidance when reviewing and approving the final ARPA funding framework.

Community Workshops and Board Prior Actions and Input

As previously mentioned, the County hosted five virtual ninety-minute community workshops and received additional correspondence from other agencies and organizations. In addition, each member of the Board of Supervisors provided a memo with priorities for utilization of ARPA funds totaling approximately \$1.2 billion, over \$500 million higher from the approved "in-concept" framework and actual funds available (Attachment B). For convenience a chart summarizing the Board memos is provided as Attachment C.

Legislative Analyst's Office Guidance

On May 4, 2021, the Legislative Analyst's Office (LAO) published "A Framework for Allocating Federal Recovery Funds", which is a set of guiding principles for the Legislature to consider when managing the ARPA funds. Among the LAO's first suggested principles is a recommendation that

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the Legislature take the time to define its goals and develop a plan in allocating these funds, recognizing that the amount the State would receive is at a “once-in-a-generation magnitude” and that ARPA guidelines do not require the State to spend the federal resources immediately.

The LAO proposed the following for consideration:

- Define goals and invest in planning
 - Identify significant challenges.
 - Take time to develop a plan with measurable goals and objectives.
- Equity lens to identify gaps
 - Consider gaps in federal assistance programs and stimulus programs.
 - Consider disparities, notably disparate health and economic consequences and consider targeting assistance to those most impacted.
- Maximize longer-term benefits
 - Use a portion of the ARPA funds to prepare for inevitable future challenges, including service needs in re-opening efforts, help mitigating when federal assistance ends likely in the fall, and planning for possible long-term pandemic impacts.

Interim Final Guidelines

On May 17, 2021, the Department of Treasury issued the Interim Final Guidelines (Interim Guidelines) to implement ARPA. The Interim Guidelines have yet to be finalized and are currently under a public comment period. The County anticipates the Guidelines will be finalized by mid-July 2021 at the earliest. Once the final guidelines are released, if it results in required changes to the framework, staff will update the Board. The coverage period on the use of ARPA is from March 3, 2021 through December 31, 2026, a span of approximately five and a half years. Although the statute requires the funds to be spent by December 31, 2024, the US Treasury defines “spent” as obligated by December 2024, and fully expensed by the end of December 2026. The allowable categories for expenditure are costs related to:

- Responding to the public health emergency;
- Addressing negative economic impacts caused by the public health emergency;
- Replacing lost public sector revenue;
- Providing premium pay for essential workers; and
- Investing in water, sewer, and broadband infrastructure.

Anticipated Significant Additional Funding

The Governor’s May Revise has prioritized billions of dollars for programs contained within the recommended ARPA framework, including investments in childcare, direct payments to individuals and families, homeless services, and behavioral health services. In addition, the federal government is likely to pass legislation allocating billions, and potentially trillions for investments in infrastructure including broadband. These future funding opportunities will need to be considered with any approved ARPA framework, with the recognition that some of the program

SUBJECT: APPROVE THE RECOMMENDED FRAMEWORK FOR THE USE OF AMERICAN RESCUE PLAN ACT FUNDING, ESTABLISH APPROPRIATIONS TO SUPPORT PROPOSED ACTIONS, AND AUTHORIZE THE AUDITOR & CONTROLLER TO ESTABLISH A TRUST FUND FOR THE AMERICAN RESCUE PLAN ACT PROGRAM FUNDS (DISTRICTS: ALL)

details outlined in the various components of the framework will need to be reevaluated when these additional funding resources become available.

In summary, the following considerations were reviewed when developing the proposed framework:

- The input provided by the public from the community workgroups held in March 2021 and other correspondence received from community advocates.
- The ARPA “In-Concept” framework approved by the Board on April 6, 2021.
- The Board of Supervisors memos on their priorities for utilization of ARPA (Attachments B and C).
- The need to ensure funding is available to cover County public health COVID-19 response costs.
- Sustainability of recommended programs beyond the COVID-19 pandemic and expenditure of ARPA funds.
- The US Treasury Interim Guidelines on the permissible uses of ARPA.
- The five and a half year time frame for allowable use of ARPA funds, from March 2021 through December 2026.
- The LAO’s advice on guiding principles when developing a plan, with a priority in identifying gaps, and maximizing the funds for long-term benefits.
- The anticipation of significant additional investments through State and federal funds for many of the programs within the ARPA components.
- The anticipated administrative costs to implement programs outlined in the ARPA framework.
- Incorporation of an equity lens to support the most vulnerable individuals and communities in San Diego County.

ARPA Recommended Framework

CATEGORY	DESCRIPTION	AMOUNT (in millions)
Current and Ongoing COVID-19 Response Costs	<ul style="list-style-type: none"> • Prior & On-going COVID-19 response costs through Sept. 2021 - \$236.50 million • Post September 2021 efforts - \$75 million <p>These components cover a range of costs for our primary COVID-19 response efforts, including testing, tracing, treating, vaccination efforts, PPE supplies, outreach and education, media, public health efforts, and administrative costs. The post September allocation of \$75 million will be reassessed for need in the coming months.</p>	\$311.50
Premium Pay for	<ul style="list-style-type: none"> • Hazard pay for County employees - \$36 million 	\$36.0

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Government Essential Workers	The original ARPA in-concept framework allocation of \$40 million included consideration of a stipend for teleworking; however, based on a review of the Interim Final Guidelines, this is not an allowable expenditure for ARPA funds. Therefore, we are reducing the ARPA allocation for hazard pay for County employees to \$36 million. General Fund Fund Balance of \$4 million is recommended to cover the stipends for teleworking.	
Mental Health Services	<ul style="list-style-type: none"> Behavioral Health Services support for children, youth and families - \$30 million <p>Behavioral health needs have been identified as a high priority especially for children and youth of all ages. Behavioral Health Services will work with schools, First 5 San Diego, Child Welfare Services, community members and other stakeholders to develop and implement a plan to address the needs of students, children from 0-5 years of age, teenagers, and Transitional Age Youth. Future State and federal funding will need to be considered when developing plans for areas of investment.</p>	\$30.0
Homeless Services	<ul style="list-style-type: none"> Housing, shelter, including acquisition of facilities and wrap-around services - \$70 million Housing vouchers & Local Rent Subsidy Program & services - \$10 million LGBTQ homeless services/housing - \$5 million <p>Many in San Diego County are currently experiencing or at risk of homelessness. Funds will be invested in housing resources and other wraparound and supportive services, housing vouchers and local rent subsidy programs, and housing programs prioritizing the LGBTQ population. The newly formed Department of Equitable Communities and Homeless Solutions will lead in developing a plan for specific use of these funds in collaboration with other County departments. Future State and federal funding will need to be considered when developing plans.</p>	\$85.0
Food Assistance	<ul style="list-style-type: none"> Food Distribution programs (food banks/meal delivery programs, etc.) - \$10 million Community Gardens - \$7 million Expansion of Mas Fresco More Fresh Nutrition Incentive Program - \$2 million 	\$20.0

SUBJECT: APPROVE THE RECOMMENDED FRAMEWORK FOR THE USE OF AMERICAN RESCUE PLAN ACT FUNDING, ESTABLISH APPROPRIATIONS TO SUPPORT PROPOSED ACTIONS, AND AUTHORIZE THE AUDITOR & CONTROLLER TO ESTABLISH A TRUST FUND FOR THE AMERICAN RESCUE PLAN ACT PROGRAM FUNDS (DISTRICTS: ALL)

	<ul style="list-style-type: none"> Nutrition incentives beyond SNAP to Medi-Cal - \$1 million <p>Food assistance was one of the top priorities that resulted from the community workshops. Incorporating community feedback and the Board's priorities, the funding will be used to invest in the expansion of Mas Fresco More Fresh Nutrition Incentive Program, nutrition incentives, community programs and food distribution programs. As with other components there may be significant additional future State and federal funding to help address these needs. These additional resources will need to be considered when finalizing the specific use in the provision of food assistance.</p>	
Senior & Youth Services	<ul style="list-style-type: none"> Youth Services Fund: Career pathways for foster youth and the San Pasqual Academy Promise - \$5 million No-cost transportation to senior and youth - \$3 million Grant program for youth sports and youth camp tuition - \$2 million <p>The funds will be used to provide no-cost transportation for seniors and youth, such as transportation vouchers, as well as be invested toward exploring career pathways for foster youth by augmenting Child Welfare Services' independent living skills program and providing funding for the San Pasqual Academy Promise. In addition, a one-time grant program for youth sports and youth camp tuition in partnership with foundations and other community agencies will be developed. Staff will return to the Board with an update on these efforts and for any necessary Board action to implement these programs.</p>	\$10.0
Child Care Subsidies	<ul style="list-style-type: none"> Child Care voucher program for targeted populations - \$4 million Child Care Grant program - \$4 million Child Care facility development and improvement - \$2 million <p>As the community and region re-opens there is a significant need for access to child care. The dollars within this component will be used to provide vouchers to families in need, grants to child care providers, and investments in child care facilities. The County will look</p>	\$10.0

SUBJECT: APPROVE THE RECOMMENDED FRAMEWORK FOR THE USE OF AMERICAN RESCUE PLAN ACT FUNDING, ESTABLISH APPROPRIATIONS TO SUPPORT PROPOSED ACTIONS, AND AUTHORIZE THE AUDITOR & CONTROLLER TO ESTABLISH A TRUST FUND FOR THE AMERICAN RESCUE PLAN ACT PROGRAM FUNDS (DISTRICTS: ALL)

	into facility development at the County Operations Center for onsite childcare. Future State and federal funding will need to be considered when developing the specifics in the use of these dollars.	
Direct Stimulus Payments	<ul style="list-style-type: none"> Direct cash assistance for populations disproportionately impacted by COVID-19 - \$15 million Innovation in Foster Care: Cash Transfer for Youth At-Risk Families - \$15 million Stimulus payments to low-income immigrants excluded from federal/State benefits - \$10 million <p>With the Stay-at-Home Order to be lifted in the coming weeks the current COVID-19 income stipend program is recommended to end June 30, 2021, and the Direct Stimulus Payments component is being recommended to support populations disproportionately impacted by COVID-19. A pilot program for Cash Transfers for families at risk of entry into foster care, and stimulus payments for low-income immigrants not eligible for federal/State benefits will be developed. Each of these programs will require additional evaluation to ensure design elements are allowable under ARPA and a return to the Board for follow-up action.</p>	\$40.0
Legal Services	<ul style="list-style-type: none"> Tenants Facing Eviction counseling and outreach/prevention services - \$15 million <p>Investing \$15 million for legal services to tenants facing eviction to provide counseling and outreach/prevention services supports the most vulnerable tenants in San Diego County. This funding is intended to help prevent eviction through community outreach and education and connecting tenants, who may otherwise not have access to or be able to afford legal representation, to existing resources that may help them understand their legal rights.</p>	\$15.0
Small Business and Non-Profit Stimulus Payments	<ul style="list-style-type: none"> Small Business and Non-profit Stimulus Program - \$31 million Restaurant Fee Waivers - \$7.5 million Special Event Fee Waiver - \$1.5 million Arts & Culture - Community Enhancement Dollars - \$5 million 	\$50.0

SUBJECT: APPROVE THE RECOMMENDED FRAMEWORK FOR THE USE OF AMERICAN RESCUE PLAN ACT FUNDING, ESTABLISH APPROPRIATIONS TO SUPPORT PROPOSED ACTIONS, AND AUTHORIZE THE AUDITOR & CONTROLLER TO ESTABLISH A TRUST FUND FOR THE AMERICAN RESCUE PLAN ACT PROGRAM FUNDS (DISTRICTS: ALL)

	<ul style="list-style-type: none"> Rental assistance for small landlords with no other source of rental assistance - \$5 million <p>The Small Business and Non-profit Stimulus Program has been a helpful resource for the community during the COVID-19 pandemic and it is recommended for \$31 million in ARPA funding to be used under the existing program parameters, distributed through the prior Board approved equity methodology. Additionally, the funds will be invested in restaurant fee waivers, special event fee waivers, rental assistance for small landlords, and for \$5.0 million to go to the Board's Community Enhancement Program, specifically to address the needs for arts and culture.</p>	
Infrastructure	<ul style="list-style-type: none"> Broadband services for the unincorporated area - \$20 million Investments in stormwater, sewer, and drinking water for the unincorporated area - \$17 million Investment in electric vehicle (EV) replacement/infrastructure - \$5 million Invest in local, independent fire districts - \$4 million <p>It is recommended to allocate \$46 million in ARPA funds for infrastructure investments in stormwater, water, sewer, broadband, EV replacement and infrastructure and local, independent fire districts. Additionally, it is recommended County staff return to the Board with options for use of these funds such as the need for community needs assessments or specific projects in these categories to fund.</p>	\$46.0
Rental Assistance	No ARPA funds are recommended to be allocated as there is significant federal and State funding for rental assistance programs and additional funding expected.	\$0
TOTAL		\$653.50

Proposed Actions

Today's item requests the Board approve the recommended ARPA funding framework and its components totaling \$653.5 million as outlined in Attachment A, establish a trust fund for ARPA funds, and establish appropriations for the framework items.

SUBJECT: APPROVE THE RECOMMENDED FRAMEWORK FOR THE USE OF AMERICAN RESCUE PLAN ACT FUNDING, ESTABLISH APPROPRIATIONS TO SUPPORT PROPOSED ACTIONS, AND AUTHORIZE THE AUDITOR & CONTROLLER TO ESTABLISH A TRUST FUND FOR THE AMERICAN RESCUE PLAN ACT PROGRAM FUNDS (DISTRICTS: ALL)

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

Today's actions to approve the allocation proposal of American Rescue Plan Act Funding supports the Building Better Health Initiative by strengthening the local food system and the Sustainable Environments/Thriving Strategic Initiative in the County of San Diego's 2021-2026 Strategic Plan by providing financial resources to assist local businesses and other essential providers impacted by COVID-19.

Respectfully submitted,



HELEN N. ROBBINS-MEYER
Chief Administrative Officer

ATTACHMENT(S)

Attachment A - Final Recommended American Rescue Plan Act Framework
Attachment B – Board of Supervisors Memos on the use of American Rescue Plan Act Funds
Attachment C - Summary of Board of Supervisors American Rescue Plan Act Priorities
Attachment D – Estimated Hazard Pay by Department

SUBJECT: APPROVE THE RECOMMENDED FRAMEWORK FOR THE USE OF AMERICAN RESCUE PLAN ACT FUNDING, ESTABLISH APPROPRIATIONS TO SUPPORT PROPOSED ACTIONS, AND AUTHORIZE THE AUDITOR & CONTROLLER TO ESTABLISH A TRUST FUND FOR THE AMERICAN RESCUE PLAN ACT PROGRAM FUNDS (DISTRICTS: ALL)

AGENDA ITEM INFORMATION SHEET

REQUIRES FOUR VOTES: ☒ Yes ☐ No

WRITTEN DISCLOSURE PER COUNTY CHARTER SECTION 1000.1 REQUIRED

☐ Yes ☒ No

PREVIOUS RELEVANT BOARD ACTIONS:

May 18, 2021 (5); Receive Update on the COVID-19 Response, Ratify Actions in Response to the Local Health Emergency and Local Emergency, and Authorize any other Action Necessary to Address the COVID-19 Pandemic; April 6, 2021 (5), Receive Update on the COVID-19 Response, Ratify Actions in Response to the Local Health Emergency and Local Emergency, Approve the Third Amendment to the Lease Agreement for 4990 Viewridge, Establish Appropriations to Implement the Emergency Rental Assistance Program, Authorize Acceptance of COVID-19 Epidemiology and Laboratory Capacity Enhancing Detection Funding, Authorize Competitive Solicitation for COVID-19 Seroepidemiological Study, Authorize Acceptance of Racial and Ethnic Approaches to Community Health Funding, and Authorize any other Action Necessary to Address the COVID-19 Pandemic; March 2, 2021 (6), Receive Update on the COVID-19 Response, Ratify Actions in Response to the Local Health Emergency and Local Emergency, Direct the Chief Administrative Officer to Return to the Board with a Framework to use Future Federal and State Stimulus Funds, and Authorize any other Action Necessary to Address the COVID-19 Pandemic.

BOARD POLICIES APPLICABLE:

N/A

BOARD POLICY STATEMENTS:

N/A

MANDATORY COMPLIANCE:


N/A



ORACLE AWARD NUMBER(S) AND CONTRACT AND/OR REQUISITION NUMBER(S):

N/A

ORIGINATING DEPARTMENT: Health and Human Services Agency


OTHER CONCURRENCE(S): Auditor & Controller




APPROVED FRAMEWORK FOR THE USE OF AMERICAN RESCUE PLAN ACT FUNDING

Andrew Pease, Chief Operations Officer, Health and Human Services Agency
June 8, 2021






AMERICAN RESCUE PLAN ACT OF 2021

1

ARPA Framework History

- March 11: Biden signed American Rescue Plan Act into law
- March 15–19: Community Workshops held
- April 6: BOS approved In-Concept ARPA Framework
- May 17: US Treasury issued Interim “Guidelines”
- Week of May 17: Board Offices provided memos on priorities
- May 19: Allocated \$648.4 million – received \$324.2m



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2

General Use of ARPA Funds

- Responding to Public Health Emergency
- Addressing Negative Economic Impacts
- Replacing Lost Public Sector Revenue
- Providing Premium Pay for Essential Workers
- Investing in Water, Sewer, and Broadband Infrastructure



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ARPA Framework Considerations

- Community Workgroups & advocates
- Approved In-Concept ARPA framework
- Board priorities
- US Treasury Interim Guidelines
- Time frame for use of ARPA funds
- Funding to cover County COVID-19 response and administrative costs
- Sustain programs beyond pandemic
- View through an equity lens and consider disparities
- The LAO's guiding principles
- Future State and federal funds



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COVID-19 ARPA & Stimulus Funding Framework Components *(in millions)*

Components	Approved Amount
Prior & Ongoing County Response Costs	\$ 311.5
Premium Pay for Gov't Essential Workers	36.0
Mental Health Services	32.0
Homeless Services	85.0
Food Assistance	20.0
Senior & Youth Services	10.0
Childcare Subsidies	16.0
Direct Stimulus Payments	40.0
Legal Services	15.0
Small Business/Non-Profit Payments	56.0
Infrastructure	32.0
Rental Assistance	0.0
Total - Components	\$ 653.50

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ARPA Framework Components Breakdown

Prior and On-Going COVID-19 Response	Approved Amount*
Prior & On-Going COVID-19 Response efforts through 09/2021	\$ 236.50
Post September 2021 efforts	\$ 75.00
Subtotal	\$ 311.50
Premium Pay for Government Essential Workers	
Hazard pay for County employees (excludes telework stipends)	\$ 36.00
Subtotal	\$ 36.00
Mental Health Services	
BHS support for children and youth (all ages, including 0-5 and school focus and TAY)	\$ 30.00
Telemedicine for IHSS (clients and providers)	\$ 2.00
Subtotal	\$ 32.00

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ARPA Framework Components Breakdown

Homeless Services	Approved Amount*
Housing, shelter, including acquisition of facilities and wrap-around services	\$ 70.00
Housing vouchers & Local Rent Subsidy Program & services	\$ 10.00
LGBTQ homeless services/housing	\$ 5.00
Subtotal	\$ 85.00
Food Assistance	
Food Distribution programs (food banks/meals on wheels, etc.)	\$ 9.00
Community Gardens	\$ 7.00
Expansion of Mas Fresco More Fresh Nutrition Incentive Program	\$ 2.00
Nutrition incentives beyond SNAP to Medi-Cal	\$ 1.00
Food system sustainability and equity procurement guidelines	\$ 1.00
Subtotal	\$ 20.00

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ARPA Framework Components Breakdown

Senior & Youth Services	Approved Amount *
Youth Services Fund - career pathways for foster youth (and support SPA promise plan)	\$ 5.00
No-cost transportation to youth (up to 24) and seniors	\$ 3.00
Grant program for youth sports and youth camps	\$ 2.00
Subtotal	\$ 10.00
Child Care Subsidies	
Child Care workforce investment	\$ 10.00
Child Care voucher program for targeted populations	\$ 2.00
Child Care Grant program	\$ 2.00
Child Care facility development and improvement	\$ 2.00
Subtotal	\$ 16.00

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ARPA Framework Components Breakdown

Direct Stimulus Payments	Approved Amount*
Direct cash assistance for populations disproportionately impacted	\$ 15.00
Innovation in Foster Care: Basic Income for Youth At-Risk Families	\$ 15.00
Stimulus payments to low-income immigrants excluded from fed/state benefits	\$ 10.00
Subtotal	\$ 40.00
Legal Services	
Eviction counseling and outreach/prevention services for tenants and landlords (5 units or less) in financial need	\$ 15.00
Subtotal	\$ 15.00

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ARPA Framework Components Breakdown

Small Business & Non-Profit Stimulus Payments	Approved Amount*
Small Business & Non-Profit Stimulus Program	\$ 33.00
Restaurant fee waivers	\$ 7.50
Special Event fee waiver	\$ 1.50
Arts & Culture (augment Community Enhancement Funds)	\$ 5.00
Rental Assistance for small landlords w/no other source of rental asst.	\$ 5.00
Security Deposit Assistance Program	\$ 4.00
Subtotal	\$ 56.00
Infrastructure	
Broadband for the entire county	\$ 10.00
Investments in Stormwater, sewer and drinking water	\$ 13.00
Investment in Electric Vehicle replacement/infrastructure	\$ 5.00
Invest in local, independent fire districts	\$ 4.00
Subtotal	\$ 32.00

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ARPA Framework Components Breakdown

Rental Assistance	Approved Amount*
Leverage existing federal and State funding for ERAP programs	\$ -
Subtotal	\$ -
TOTAL – ALL COMPONENTS	\$ 653.50

**In Millions*





COUNTY OF SAN DIEGO

AGENDA ITEM

BOARD OF SUPERVISORS

NORA VARGAS
First District

JOEL ANDERSON
Second District

TERRA LAWSON-REMER
Third District

NATHAN FLETCHER
Fourth District

JIM DESMOND
Fifth District

DATE: June 8, 2021

04

TO: Board of Supervisors

SUBJECT

RECEIVE UPDATE ON COMPREHENSIVE COUNTY SUBSTANCE USE HARM REDUCTION STRATEGY (DISTRICTS: ALL)

OVERVIEW

On January 26, 2021 (13), the San Diego County Board of Supervisors (Board) voted to find prior Board direction opposing harm reduction programs, including the December 9, 1997 resolution entitled "Resolution to Oppose Needle Exchange Programs," to no longer be in effect.

The Board further directed the Chief Administrative Officer to create an Action Plan to realize a Syringe Services Program to meet the needs of San Diego County's population, and to return within 90 days with a comprehensive County Substance Use Harm Reduction Strategy including immediate-, intermediate- and long-term actions that broadens the existing "Opioid and Prescription Drug Misuse" strategy to bring a harm reduction approach to all substance use interventions across San Diego County.

Today's update outlines a comprehensive County Substance Use Harm Reduction Strategy which envisions a world where harms related to substance use are seen as concerns of overall health and well-being, where stigma does not impede access to services, and where we realize a community free of substance use-related harms, with efforts concentrated in four specific focus areas: cross-sectoral convening, housing, workforce, and healthcare integration and access. An action plan to realize a Syringe Services Program is included in the update, as part of the healthcare integration and access focus area.

As further engagement of stakeholders in shaping the tactics associated with the Harm Reduction Strategy moves forward, including input from those with lived experience, specific tactics to operationalize a local naloxone distribution effort will be launched immediately to address alarming rates of drug overdose deaths further exacerbated during the course of the COVID-19 pandemic.

Today's action provides a framework for our County's collaboration with community stakeholders to further incorporate a client-centered, data-driven, public health-oriented approach into service delivery and policy. By supporting the reduction of individual and community harms associated with substance use, this item supports the County's *Live Well San Diego* vision.

SUBJECT: RECEIVE UPDATE ON COMPREHENSIVE COUNTY SUBSTANCE USE HARM REDUCTION STRATEGY (DISTRICTS: ALL)

RECOMMENDATION(S)

CHIEF ADMINISTRATIVE OFFICER

Receive an update on the comprehensive County Substance Use Harm Reduction Strategy, inclusive of a Syringe Services Action Plan.

EQUITY IMPACT STATEMENT

Poverty, drug use, and involvement with the justice system are deeply intertwined and the resulting community and individual traumas are disproportionately felt by low-income populations, as well as communities of Black, Indigenous, and people of color (BIPOC) throughout San Diego County. The County Substance Use Harm Reduction Strategy is designed to combat these patterns at a systemic level and to address the most pressing issues at the intersection of behavioral and public health to improve outcomes for people who use drugs (PWUD) and the broader San Diego community.

Today's action advances equity and racial justice through a client-centered, data-driven, population health approach that delivers behavioral health services through a system of care which recognizes the lived experience of people who use drugs and affirms the dignity of all individuals, families, and communities.

FISCAL IMPACT

There is no fiscal impact associated with this item.

BUSINESS IMPACT STATEMENT

N/A

ADVISORY BOARD STATEMENT

The Behavioral Health Advisory Board unanimously supported the recommendations at its meeting on May 6, 2021. This was presented to the Health Services Advisory Board as an informational item on June 1, 2021.

BACKGROUND

In an action brought forward by Chair Nathan Fletcher on January 26, 2021 (13), the San Diego County Board of Supervisors (Board) voted to find prior Board direction opposing harm reduction programs, including the December 9, 1997 resolution entitled "Resolution to Oppose Needle Exchange Programs," to no longer be in effect.

The Board further directed the Chief Administrative Officer to:

- Create an Action Plan to realize a Syringe Services Program to meet the needs of San Diego County's population, including identification of necessary resources and program partnerships, and in accordance with findings and recommendations in the January 14, 2021, Health and Human Services Agency (HHSA) memo and accompanied the Family Health Centers of San Diego and San Diego State University's Institute for Public Health study, *Environmental Assessment on People Who Inject Drugs*, and report back to the Board with regular updates; and

SUBJECT: RECEIVE UPDATE ON COMPREHENSIVE COUNTY SUBSTANCE USE HARM REDUCTION STRATEGY (DISTRICTS: ALL)

- Return within 90 days to the Board with a comprehensive County Substance Use Harm Reduction Strategy including immediate, intermediate, and long-term actions that broadens the existing “Opioid and Prescription Drug Misuse” strategy to bring a harm reduction approach to all substance use interventions across the County.

Following this direction, HHSA leadership immediately established an internal Population Health Steering Committee. The Population Health Steering Committee is an interdepartmental body formed to support a broad-reaching, multidisciplinary collaboration across key County of San Diego (County) departments and business groups for the design, planning, and implementation of population health approaches in San Diego County. Co-chaired by Public Health Officer and Public Health Services Director, Dr. Wilma Wooten and Behavioral Health Services Director, Dr. Luke Bergmann, the Steering Committee has led the development of a **comprehensive County Substance Use and Harm Reduction Strategy (Harm Reduction Strategy)**, inclusive of a **Syringe Services Action Plan**, while working swiftly on the immediate, life-saving task of expanding naloxone distribution in San Diego County.

The Harm Reduction Strategy:

- Envisions a world where harms related to substance use are seen as concerns of overall health and well-being, where stigma does not impede access to services, and where we realize a community free of substance use-related harms.
- Strives to respect all people who use drugs, as well as their families and communities, regardless of gender, race, age, sexual orientation, ethnicity, culture, spirituality, health, or socioeconomic status.
- Is driven by a multidisciplinary evidence base and builds upon over a decade of foundational work of local regional stakeholders to mitigate the harms to residents, families and communities related to the misuse of prescribed and illicit opioids and other prescribed medications.

The Harm Reduction Strategy includes four major focus areas listed below, with complete details on Attachment A. Each focus area contains a roadmap of activities rooted in immediate-, intermediate- and long-term tactics.

- *Cross-sectoral Convening,*
- *Housing,*
- *Workforce, and*
- *Healthcare Integration and Access.*

While deeper engagement of stakeholders is in development and implementation of the tactics associated with the Harm Reduction Strategy moves forward, specific tactics within the focus area of *healthcare integration and access* to operationalize a local naloxone distribution effort will be launched immediately to address alarming rates of drug overdose deaths further exacerbated during the course of the COVID-19 pandemic.

SUBJECT: RECEIVE UPDATE ON COMPREHENSIVE COUNTY SUBSTANCE USE HARM REDUCTION STRATEGY (DISTRICTS: ALL)

Local Naloxone Distribution Effort

Naloxone, commonly known by brand name Narcan, is an emergency medication which reduces and reverses the effects of opioid overdoses. In practice, naloxone is a life-saving drug often administered by bystanders to an individual in the midst of an opioid overdose, allowing the overdosing individual’s normal breathing to be restored. Naloxone can be delivered intranasally with the use of a mucosal atomizer device or, intravenously or intramuscularly with a syringe and vial, or auto-injector.

Naloxone is commonly carried by first responders, law enforcement agencies, and community-based organizations that serve people who may be at risk of drug overdose and others who may know people at risk of overdose. Additionally, County Emergency Medical Services developed a partnership with the California Department of Healthcare Services (DHCS) Naloxone Distribution Project (NDP). Through this program, EMS agencies, first responders, and community organizations in California can distribute naloxone to those who would benefit following an emergency patient contact.

Public health research reflects that broad community distribution of naloxone is a proven strategy to reduce overdose deaths. Broad distribution, coupled with training, helps ensure those who are using substances are carrying this life saving medication if needed in the event of an overdose. It also helps ensure people who may witness an overdose, such as family members of a person who uses substances, have naloxone readily available and can render aid. Naloxone success depends on the level of saturation within the community, and ideally should be widely distributed and available at a variety of access points.

While there is already a baseline level of naloxone distribution and access in the community, the rising threat of fentanyl – an ultra-potent opioid found increasingly in opioid and non-opioid drug supplies alike – has precipitated the need for greater naloxone saturation in the community. The onset of COVID-19 coincided with a significant rise in deaths due to drug overdose (50% more overdose deaths in July and August 2020 than in February and March 2020), further increases the urgency for naloxone distribution.

Building on existing efforts, the County’s plan to enhance our naloxone distribution effort includes the implementation of a local Naloxone Standing Order. Naloxone is a prescription medication, requiring a prescribing entity to write individual prescriptions for each person receiving a dose of the medicine. This process can be time-consuming and prohibitive of the ability to quickly and efficiently distribute naloxone into the community. California law provides for the issuance of a local standing order which is a legal document authorizing properly trained individuals within a given jurisdiction to distribute naloxone without needing a specific prescription for each trained community recipient. The standing order for naloxone distribution was recently signed by Dr. Wilma Wooten, the County’s Public Health Officer, which authorizes trained County staff, contracted staff, health organizations, community-based organizations, and other trained community members to distribute naloxone per the standing order. This standing order removes barriers and allows the County to enhance the speed and volume of naloxone distribution into the community.

SUBJECT: RECEIVE UPDATE ON COMPREHENSIVE COUNTY SUBSTANCE USE HARM REDUCTION STRATEGY (DISTRICTS: ALL)

To take the initial steps to enable broader community distribution of naloxone, HHSA has filed an application to receive a free supply of naloxone from the State Department of Health Care Services via its Naloxone Distribution Project. Potential distribution sites and distribution methods are being evaluated in the context of population health data, operational efficiency, and on achieving the greatest success of community saturation. Information from this initial distribution effort will be used to inform any longer-term plans for expanding and sustaining broad community distribution.

Another immediate-term tactic within the *healthcare integration and access* focus area is creation of a Syringe Service Program Action Plan per Board direction. Realizing a County Syringe Services Program (SSP) is a complex effort requiring collaboration with partners and stakeholders across disciplines and communities as well as inputs of resources. Outlined below are action steps to realize a Syringe Service Program.

Syringe Service Program (SSP) Action Plan

In support of those at risk of harm from substance use, HHSA continues to enhance the array of engagement strategies by transforming our care ecosystem toward low-barrier access modes of care and ensuring the process to get health care and social services is easy. Settings that employ harm reduction strategies adopt a supportive, inclusive, stigma-free, “meeting people where they’re at” posture and facilitate easy entry into general health care, social services, and/or treatment.

Based in the community, SSPs are an evidence-based component of low-barrier care that provides clean syringes to people who inject drugs (PWID) and collect used syringes in return. This helps ensure hazardous needles are not discarded into parks, on streets, or elsewhere in the community, and supports a reduction of sharing of needles among PWID which contributes to reductions in transmission and acquisition of the Hepatitis C virus (HCV), the human immunodeficiency virus (HIV), and other diseases. Notably, in 2019, 30% of newly reported chronic Hepatitis C cases in San Diego County were people with a history of intravenous drug use. SSPs are a critical component of working together with other community-wide efforts such as the Eliminate Hepatitis C San Diego County initiative.

Additional services may be offered at SSPs, such as linkages to substance use disorder treatment, mental health services, primary and specialty medical care, social services, HCV and HIV testing, naloxone training and distribution, overdose prevention assistance, and education. SSPs may utilize a workforce consisting of medical, behavioral health, public health, and addiction specialist personnel, as well as peer support specialists and volunteers.

In response to Board direction, a high-level SSP Action Plan was created to meet the needs of San Diego County’s populations and ensure successful deployment and operation of a SSP Action Plan.

1. Engaging San Diego County stakeholders and residents

The County will engage residents and stakeholders from organizations and constituent groups across San Diego County’s communities to receive input that will shape planning and implementation efforts.

SUBJECT: RECEIVE UPDATE ON COMPREHENSIVE COUNTY SUBSTANCE USE HARM REDUCTION STRATEGY (DISTRICTS: ALL)

To support these efforts, HHSA will procure a consultant to conduct a Community Readiness Assessment. The Community Readiness Assessment will help the County better understand resident knowledge of SSPs, identify organizations and groups that support deployment of SSPs, and better understand concerns and objections regarding SSPs, particularly for residents who are located in areas considered for SSPs.

The County will use information and data collected from this assessment to build relationships with organizations and constituent groups and support the action steps outlined below including the reviewing and assessment of policy, and development evaluation criteria to assess the success of future SSPs. Ultimately, information and data from this Community Readiness Assessment will be used to help improve the County’s response to our residents impacted by injection drug use and support the health and safety of all our residents.

2. Convening the County enterprise around planning and implementation

Given that the County has not previously operated SSPs, and given that implementation of SSPs will involve multiple stakeholders across the County enterprise, this set of activities will bring together representatives of County leadership and business groups to meet and collaborate to identify key operational and policy decisions. To guide the discussions, staff and subject matter experts will hear and share community input gathered including from those with lived experience; key population health and other data; and review best practices as identified by technical experts and as informed by the experiences of other jurisdictions. Staff will develop a work plan describing key activities and decisions required to deploy SSPs along with proposed timelines.

3. Developing policies and procedures for siting, implementing, and monitoring SSPs

This set of activities will create the operational blueprint for the establishment, monitoring, and evaluation of SSPs. Key activities will include identification of potential resource needs such as staffing and funding, and development of policies, procedures, and criteria to site, implement, and monitor SSPs. This includes the development of processes to respond promptly to resident concerns about any sited SSPs, including processes for follow-up, investigation, response, and resolution.

4. Implementation and ongoing evaluation

The model for, and timing of, implementation of SSPs will be shaped by the action steps above. In support of transparency with stakeholders and constituents, the County will identify key measures associated with any permitted SSPs and collect data that can be used to assess their effectiveness. These measures will include operational measures (e.g., number of syringes collected, number of syringes distributed, number of naloxone kits distributed, number of fentanyl test strips distributed, number of HIV and HCV tests provided), and outcome measures (e.g., the percentage of clients linked to medical care, number of clients enrolled in substance use treatment and the percentage who complete treatment, reductions in local overdose admissions, reductions in local overdose deaths). Information on development of these measures will be provided in a future update.

SUBJECT: RECEIVE UPDATE ON COMPREHENSIVE COUNTY SUBSTANCE USE
HARM REDUCTION STRATEGY (DISTRICTS: ALL)

As resources are needed to support implementation and operationalization of elements of the Comprehensive Harm Reduction Strategy, including realizing a Syringe Services Program, these will be identified for your Board.

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

Today's action supports the County of San Diego's 2021-2026 strategic initiatives of Building Better Health and Living Safely, as well as the County's *Live Well San Diego* vision, by updating a comprehensive and coordinated plan to support people who use drugs through implementation of proven harm reduction strategies.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "H. Robbins-Meyer", is written over a light gray rectangular background.

HELEN N. ROBBINS-MEYER
Chief Administrative Officer

ATTACHMENT(S)

Attachment A – County of San Diego Comprehensive Harm Reduction Strategy

County of San Diego Comprehensive Harm Reduction Strategy

INTRODUCTION/BACKGROUND

Despite longstanding commitments and efforts by leaders from across sectors including substance use disorder (SUD) treatment providers within San Diego County, high-risk behaviors and harms related to substance use remain at an all-time high.

Overdose deaths in the region jumped from 616 in 2019 to 941 deaths in 2020, including a three-fold increase in fentanyl deaths. Sadly, a higher monthly trend continues in the early part of 2021, on pace for nearly 1,200 overdose deaths for the year if the current trend continues. Overdose deaths are only one indicator of the impact of substance use in our region, as the harms of substance use extend to families, neighborhoods, the healthcare system, and to other intersecting systems.

To make a significant impact on this trend, a broader approach focusing specifically on reducing harms and high-risk behaviors can be integrated across health and social services—one that is cohesive and on a continuum with existing SUD services. Over thirty years of evidence around the world has shown that harm reduction approaches reduce the spread of the Hepatitis C virus (HCV) and the human immunodeficiency virus (HIV), lead to greater engagement with treatment, lead to reductions in crime, and reduce overdose deaths, among other positive outcomes, with no increase in usage rate of substances.

A Comprehensive Harm Reduction Strategy is being put forth in this document, pursuant to Board of Supervisors' direction on January 26, 2021 (13). The Harm Reduction Strategy will guide the County of San Diego, in collaboration with partners and stakeholders, in addressing the most pressing issues at the intersection of behavioral and public health; and will initiate and effect data-driven decision-making and evidence-based solutions to improve outcomes for both the people who use drugs (PWUD) population—a high-need population—and the broader San Diego community.

VISION

Envisioning a community where the impacts related to substance use are seen as a crisis that influences overall health, well-being, and the quality of life of the individual, families, and community, where stigma does not impede access to services, and where we realize a community free of substance use-related harms.

MISSION

To protect San Diegans from the individual, family, and community impact of drug use by enacting a harm reduction approach towards substance use which prioritizes human dignity, saving lives, providing appropriate levels of care for people who use drugs (PWUD), and best practices in addressing substance use, and addiction.

GUIDING PRINCIPLES

Guiding principles of the harm reduction approach in San Diego County are as follows:

page 1 of 5

Human Rights and Dignity

Substance Use and Harm Reduction approaches in San Diego County respect all human beings, meeting them “where they’re at” without judgment and aim to reduce the stigma of people who use drugs (PWUD).

Diversity and Social Inclusivity

The County of San Diego strives to respect all PWUD, as well as their families and communities, regardless of gender, race, age, sexual orientation, ethnicity, culture, spirituality, health, or socioeconomic status.

Health and Well-Being Promotion

The County of San Diego aligns with the *Live Well San Diego* vision of healthy, safe, and thriving communities. Harm reduction efforts are oriented toward improving the health, safety, and capacity to thrive for all PWUD.

Partnerships & Collaborations

Harm reduction approaches are informed by and carried out through partnerships and collaborations across all sectors in the community. Partnerships are built upon the foundation of shared goals and trust in the interest of serving our community.

Participation (“Nothing about us without us”)

The County of San Diego recognizes the right of PWUD to be involved in the efforts to reduce the debilitating impact of drug use in their communities.

Accountability and Improvement

The County of San Diego is committed to continuous improvement in the quality of its harm reduction efforts and intends to use data, community feedback, and input to continually assess current and future individual and community needs.

STRATEGIC APPROACH AND PRIORITIES

Leveraging the expertise of individuals with lived experiences, behavioral health professionals, public health professionals, primary care providers, first responders, clinical experts, housing experts, and other subject matter experts and stakeholders, the Harm Reduction Strategy will inform collaborative efforts, evidence-based programming, and data-informed approaches to realize a physical health and behavioral health landscape which addresses the unique needs of specific populations in San Diego County. The strategy will guide decision-making for population health interventions initiated, designed, and implemented by the County of San Diego.

- Prioritize parity, healthcare integration, and a *harm reduction in all policies and programs* approach across all key areas of work.
- Use an approach that employs equity in the governance of mental health, substance use, and physical health services.
- Utilize a data-driven approach and best practices of harm reduction.
- Work with existing initiatives—such as Getting to Zero, Hep C Elimination Initiative in San Diego County, TB Elimination Initiative, and others—as touchpoints to further the goals of eliminating disease and reducing impact to the focus population.

TACTICAL FOCUS AREAS

The foundation of a successful substance use and harm reduction ecosystem in San Diego County will be worked on and operationalized within four tactical areas. These tactical focus areas are as follows:

- I. **Cross-Sectoral Convening**
The mission of greater health equity and improved health outcomes for the PWUD population in San Diego County requires integrated, cross-sector approaches. Convening and collaboration between County of San Diego business units, as well as health networks, community-based organizations, physical health entities, family and community voices, and other stakeholders is necessary to address the multifactorial challenges facing the PWUD population.
- II. **Housing**
Substance use and homelessness often overlap, with homelessness exacerbating the harmful effects of drug use, and vice versa. Being on the street and pushed to the margins increases the likelihood of risky behaviors and decreases the effectiveness of interventions aimed at reducing the harmful impact of substance use. Housing, therefore, must be a key pillar of a comprehensive harm reduction strategy.
- III. **Workforce**
To carry out the mission and realize the vision of the Harm Reduction Strategy, a workforce that is trained and skilled in the philosophy, approaches, and interventions of harm reduction will be a necessity. Developing and supporting a workforce that employs harm reduction principles across levels and types of service will be prioritized in our strategy.
- IV. **Healthcare Integration and Access**
The health and well-being of individuals do not exist in silos. Integration of care and access to the right services for PWUD is paramount. The effects of substance use impact the mental health and physical health of an individual, and the physical health and mental health of an individual impact the course and outcomes of their substance use. Integration across mental health, SUD, physical health, and community-based services is a key component of addressing the well-being of PWUD and managing care of individuals in a lower-acuity, chronic care context rather than expensive episodic, acute care contexts. For the chronic condition of SUD, harm reduction services and principles help add the necessary bridge for many clients for whom recovery is non-linear. When SUD treatment providers work in conjunction with harm reduction services and with harm reduction principles, service continuity can be optimized. Treating the whole person and ensuring access to best practices in harm reduction guide this focus area.

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TACTICAL FOCUS AREAS

(1) Cross-Sectoral Convening	(2) Housing	(3) Workforce	(4) Healthcare Integration and Access
Immediate-term Tactics			
<ul style="list-style-type: none"> Include public health leadership from government and community in governance of key regional meetings Deploy County epidemiologists to provide technical assistance to key regional convenings to support development of a harm reduction approach, (i.e., development of data reports and dashboards) 	<ul style="list-style-type: none"> Collaborate with housing technical expert(s) for review and comparison of needs and/or investments, including recommendations for leveraging national best practices and funding strategies that integrate harm reduction principles in housing settings 	<ul style="list-style-type: none"> Ensure that harm reduction is a core component of peer service delivery 	<ul style="list-style-type: none"> Issue Local Standing Order and implement broad local Naloxone distribution sprint to address COVID-19-related patterns of substance use Optimize Drug Medi-Cal Organized Delivery System provider network naloxone distribution Implement Syringe Service Action Plan Pursue care management coordination with primary care for mental health (i.e., mild/moderate) and physical health Conduct academic detailing to address barriers and expand access to buprenorphine Collaborate with Federally Qualified Health Centers (FQHCs) and other partners to identify opportunities to further infuse a harm reduction approach into service delivery Pursue fentanyl-specific testing
Intermediate-term Tactics			
<ul style="list-style-type: none"> Implement joint annual harm reduction strategy-setting between key regional convenings Leverage new data reports and dashboards to inform upstream prevention efforts as part of cross-sectoral convenings 	<ul style="list-style-type: none"> Implement strategies identified via the above review to integrate harm reduction principles in housing settings, including strategies to address people with substance use disorder who are not considered disabled Develop revised metrics and associated targets related to housing that incorporates a harm reduction approach 	<ul style="list-style-type: none"> Enhance County and contracted workforce training to include harm reduction principles and strategies 	<ul style="list-style-type: none"> Identify solutions to address parity in the provision/siting of substance use disorder versus mental health services Identify policy opportunities to integrate FQHC and substance use disorder care delivery, including enhanced integration/coordination around Drug Medi-Cal Organized Delivery System (DMC-ODS), and collaboration around CalAIM Engage health plans, including Medi-Cal plans, to incorporate harm reduction opportunities in policy and practice Promote buprenorphine access across all sectors; establish centralized quantitative metric for services

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(1) Cross-Sectoral Convening	(2) Housing	(3) Workforce	(4) Healthcare Integration and Access
Long-term Tactics			
<ul style="list-style-type: none"> Develop an integrated, unified, cross-sectoral regional governance structure for harm reduction 	<ul style="list-style-type: none"> Pursue policy solutions to establish parity in funding for substance use housing resources 	<ul style="list-style-type: none"> Develop a harm reduction training program for workforce working within the continuum of care for PWUD, including Drug Medi-Cal Organized Delivery System providers Expand peer specialist workforce trained in employing harm reduction strategies within the County's system of care 	<ul style="list-style-type: none"> Pursue policy solutions to integrate mental health (i.e., mild/moderate) with substance use disorder programs



ITEM #4: REPORT BACK ON COMPREHENSIVE COUNTY SUBSTANCE USE HARM REDUCTION STRATEGY

Nick Macchione, Agency Director, Health and Human Services Agency

Luke Bergmann, PhD, Director, Behavioral Health Services

Wilma J. Wooten, MD, MPH, Public Health Officer and Director, Public Health Services

June 8, 2021

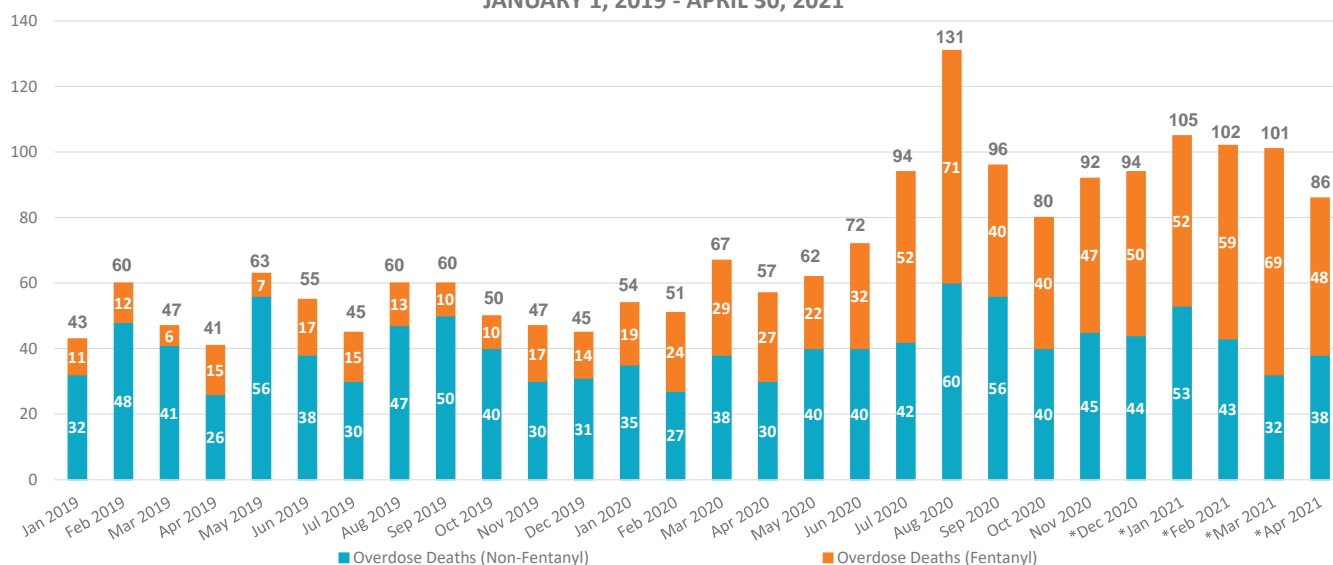


REPORT BACK ON COUNTY SUBSTANCE USE & HARM REDUCTION STRATEGY



LIVE WELL
SAN DIEGO

ACCIDENTAL OVERDOSE DEATHS IN SAN DIEGO COUNTY,
JANUARY 1, 2019 - APRIL 30, 2021



*Data for Dec 2020 – April 2021 include probable overdose deaths, pending investigation

REPORT BACK ON COUNTY SUBSTANCE USE & HARM REDUCTION STRATEGY



LIVE WELL
SAN DIEGO

Among individuals with a diagnosable substance use disorder...

90% never
enter
treatment



3x higher
emergency
department visits



5x higher
hospitalizations



REPORT BACK ON COUNTY SUBSTANCE USE & HARM REDUCTION STRATEGY



LIVE WELL
SAN DIEGO

Minute Order

In an action on January 26, 2021 (13), the San Diego County Board of Supervisors (Board) voted to find prior Board direction opposing harm reduction programs to be no longer in effect.

The Board directed the Chief Administrative Officer to:

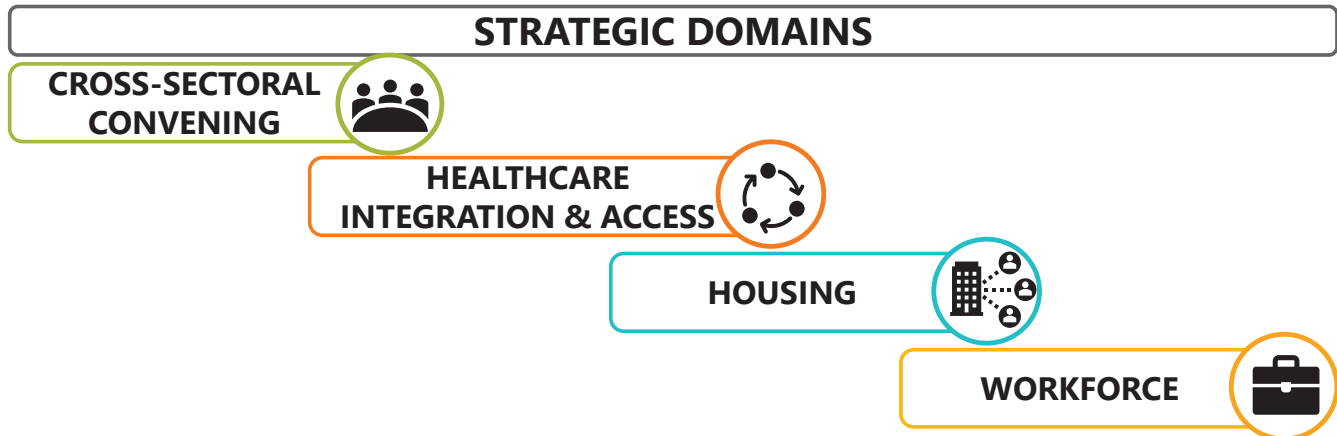
- Create an Action Plan to realize a Syringe Service Program; and
- Return to the Board with a comprehensive County Substance Use Harm Reduction Strategy.

REPORT BACK ON COUNTY SUBSTANCE USE & HARM REDUCTION STRATEGY



LIVE WELL
SAN DIEGO

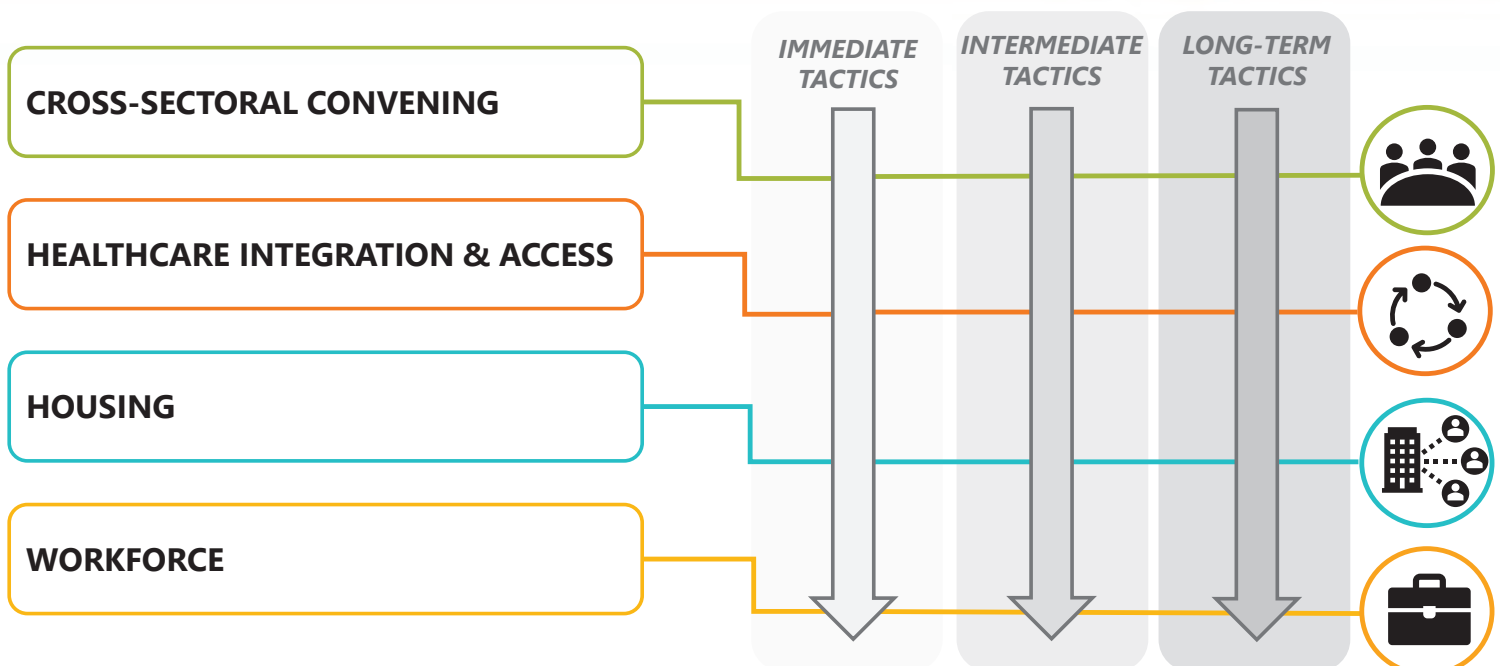
- The County Harm Reduction Strategy is based on a multidisciplinary evidence base with systemic efforts concentrated in four strategic domains
- Each focus area is built on a roadmap of immediate, intermediate and long-term tactics



REPORT BACK ON COUNTY SUBSTANCE USE & HARM REDUCTION STRATEGY



LIVE WELL
SAN DIEGO



REPORT BACK ON COUNTY SUBSTANCE USE & HARM REDUCTION STRATEGY



LIVE WELL
SAN DIEGO



CROSS-SECTORAL CONVENING

Fostering Cross-sectoral Convenings that Facilitate Dynamic Response to Changes in Drug Use

- Unification of the Prescription Drug Abuse Task Force and Meth Strike Force under a broad substance use harm reduction task force
- Evenly shared governance between public safety and public health
- Shared resources and data

SUBSTANCE USE HARM REDUCTION TASK FORCE



REPORT BACK ON COUNTY SUBSTANCE USE & HARM REDUCTION STRATEGY



LIVE WELL
SAN DIEGO



HEALTHCARE INTEGRATION & ACCESS

HEALTHCARE INTEGRATION & ACCESS



Naloxone Distribution
Program & Standing Order

Community Readiness
Assessment

Syringe Service Programs
Implementation

REPORT BACK ON COUNTY SUBSTANCE USE & HARM REDUCTION STRATEGY



LIVE WELL
SAN DIEGO



HEALTHCARE INTEGRATION & ACCESS

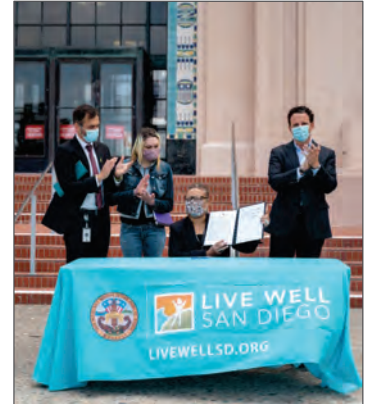
Local Naloxone Distribution Effort

- Naloxone is an emergency medication which reduces and reverses the effects of opioid overdoses, it is also known by the brand name Narcan
- Broad community distribution of naloxone is proven to reduce overdose deaths
- Recent increased threat of fentanyl requires greater naloxone saturation in the community

Action Steps

Naloxone Standing Order

Evaluation of potential distribution sites and methods



REPORT BACK ON COUNTY SUBSTANCE USE & HARM REDUCTION STRATEGY



LIVE WELL
SAN DIEGO



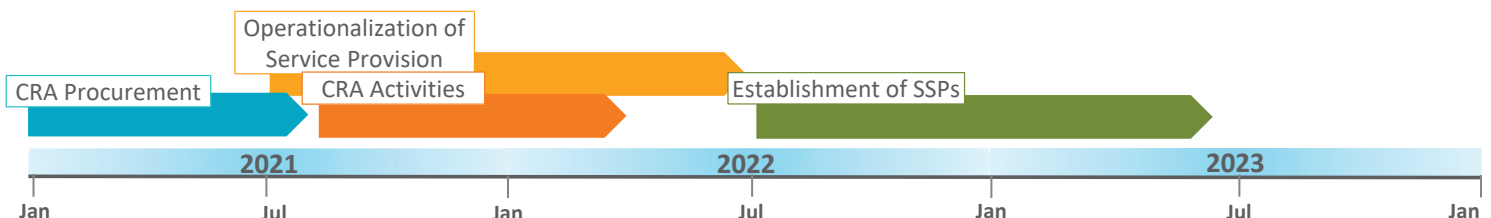
HEALTHCARE INTEGRATION & ACCESS

Syringe Service Program (SSP) Action Plan

- Engage San Diego County stakeholders and residents via the Community Readiness Assessment (CRA)
- Convene the County Enterprise around planning and implementation
- Develop policies and procedures for siting, implementing, and monitoring SSPs
- Implementation and ongoing evaluation

Community Readiness Assessment

- Gather insight into resident knowledge of SSPs
- Identify organizations and groups to support SSP deployment
- Understand community concerns and objections



REPORT BACK ON COUNTY SUBSTANCE USE & HARM REDUCTION STRATEGY



LIVE WELL
SAN DIEGO



HOUSING

Housing Support for Chronically Homeless with Severe Substance Use Disorder

- Informed by a *housing first* approach, investing in collaborative, low-barrier bridge housing, permanent housing solutions, and resident support services that are not contingent on treatment status
- Community-Harm Reduction Team (C-HRT) – a specialized harm reduction team that provides outreach and engagement to homeless persons with a substance use or co-occurring conditions in the City of San Diego
- Safe Havens for chronically homeless with harmful substance use



REPORT BACK ON COUNTY SUBSTANCE USE & HARM REDUCTION STRATEGY



LIVE WELL
SAN DIEGO



WORKFORCE

What is a Harm Reduction Workforce?

Peer Support Workforce

- Establish capacity for peer support services within mental health, substance use, and other areas of work
- Ensure harm reduction is a core component of peer service delivery
- Enhance County and contracted workforce training to include harm reduction principles and strategies

Workforce Conference

- Address the shortage of behavioral health workers and foster a new generation of health professionals

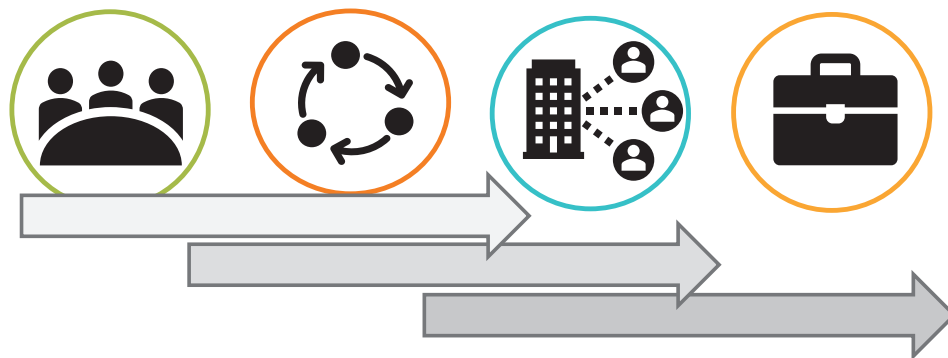
REPORT BACK ON COUNTY SUBSTANCE USE & HARM REDUCTION STRATEGY



LIVE WELL
SAN DIEGO

Looking Ahead

- Ongoing, aggressive implementation of immediate-term tactics
- Building out additional intermediate- and long-term tactics across the four strategic domains



TODAY'S ACTION



LIVE WELL
SAN DIEGO

Recommendation

Receive an update on the comprehensive County Substance Use Harm Reduction Strategy, inclusive of a Syringe Services Action Plan.



ITEM #4: REPORT BACK ON COMPREHENSIVE COUNTY SUBSTANCE USE HARM REDUCTION STRATEGY

Nick Macchione, Agency Director, Health and Human Services Agency

Luke Bergmann, PhD, Director, Behavioral Health Services

Wilma J. Wooten, MD, MPH, Public Health Officer and Director, Public Health Services

June 8, 2021





COUNTY OF SAN DIEGO

BOARD OF SUPERVISORS

1600 PACIFIC HIGHWAY, ROOM 335, SAN DIEGO, CALIFORNIA 92101-2470

AGENDA ITEM

COUNTY OF SAN DIEGO

2021 MAY 28 AM 11:48

CLERK OF THE BOARD
OF SUPERVISORS

DATE: June 8, 2021

10

TO: Board of Supervisors

SUBJECT

FRAMEWORK FOR THE FUTURE: CREATING AN OFFICE OF IMMIGRANT AND REFUGEE AFFAIRS (DISTRICTS: ALL)

OVERVIEW

Immigrants and refugees are an integral part of the fabric of the San Diego community and have a set of unique needs related to their transition into a new community. The immigrant and refugee community is the economic engine that keeps our economy strong and brings rich cultural diversity to the region. Connecting these families and individuals to vital information, services and resources in various languages and a culturally competent manner is critical to the region's health, safety, and economic future.

Historically, many immigrant populations in San Diego have been disconnected from some of the very services they are eligible for and need. Others were denied benefits due to their immigration status because of state and federal policies. Some remain disconnected out of fear that any interaction with a government entity would expose them to countless risks.

That is why we are proposing to create an Office of Immigrant and Refugee Affairs (OIRA). OIRA will serve as a centralized hub for all issues related to immigrants and refugees and connect individuals and families to County services and community resources and information. Through the creation of this office, we are taking critical steps to make San Diego County more welcoming for all residents.

RECOMMENDATION(S)

CHAIR NATHAN FLETCHER AND VICE-CHAIR NORA VARGAS

1. Direct the Chief Administrative Officer to establish an Office of Immigrant and Refugee Affairs as an independent office within the Health and Human Services Agency and report directly to the Community Operations Officer, including additional staff support and resources, as appropriately classified by the Department of Human Resources, and reassigning existing staff positions that currently work on programs and services for immigrants and refugees.

SUBJECT: FRAMEWORK FOR THE FUTURE: CREATING AN OFFICE OF IMMIGRANT AND REFUGEE AFFAIRS

2. Direct the Chief Administrative Officer to refer costs of standing up this new office in the amount of \$2 million dollars to budget for consideration during the Fiscal Year 2021-22 budget deliberations and adoption.
3. Direct the Chief Administrative Officer to return to the Board within 90 days with a report back on the proposed overall scope, roles and responsibilities of the Office of Immigrant and Refugee Affairs, including reorganization of existing staff and resources that work with these populations and additional staff and resources needed for execution of the following duties including, but not limited to:

- a. Building on existing refugee programs and establishing a priority of devoting county resources to the immigrant population, regardless of immigration status.
- b. Providing a central location for public questions and connection to county and community resources, including available legal resources.
- c. Creating an outreach and marketing strategy in-language to ensure community members know about available resources and know their rights on topics such as immigration, housing, worker rights, fraud protection, and general opportunities available throughout the county.
- d. Establishing a physical office, an easily navigable website available in multiple languages, and a phone number to access resources, including 211.
- e. Regularly engaging and convening stakeholders that represent immigrants and refugees to provide information and solicit information about trends and unmet needs and facilitating planning for better coordination among county programs.
- f. Acting as an expert on immigrants and refugees in the San Diego region, presenting annually to the Board of Supervisors on work accomplished, demographics of the immigrant and refugee population, gaps in services and funding, improvement of program implementation and coordination and local, state and federal policy suggestions and engagement to improve life in San Diego for immigrants and refugees. This report shall be developed through stakeholder engagement and convenings of county agencies.
- g. In partnership with the Public Defender's Office of Assigned Counsel, creating a link for referrals to the Board-Created Immigrant Rights Legal Defense Program for detained immigrants facing deportation.

EQUITY IMPACT STATEMENT

Over twenty percent of San Diegans were born in another country, but historically, many immigrants in San Diego County were denied services based on their immigration status because of misguided policies built on misinformation and false narratives about immigrants seeking to make San Diego their new home. As a result of these policies, many immigrants remain disconnected and unsure about what services they are eligible for and afraid that engaging with government entities could expose them to countless risks. An Office of Immigrant and Refugee Affairs (OIRA) will create a sense of belonging and welcoming for all San Diegans and make it a County priority to proactively engage with communities previously left behind and provide an equitable playing field for them to thrive. As San Diego County continues its legacy as the California county that takes in the most refugees, OIRA will prioritize providing services and resources to immigrants and refugees, regardless of immigration status. In outreach and

SUBJECT: FRAMEWORK FOR THE FUTURE: CREATING AN OFFICE OF IMMIGRANT AND REFUGEE AFFAIRS

relationship building, OIRA will provide connections to available resources and share critical information about legal rights, education and general resources for those immigrants making their home in San Diego. OIRA will remain connected directly to the community by engaging stakeholders for feedback on the needs of the community. OIRA staff will become an expert on issues related to immigrants and refugees and bring policy proposals before the Board of Supervisors annually as to how it could better meet needs. This proposal's development resulted from several meetings with community groups and advocates who shared its importance and what roles would be most critical to support immigrant and refugee populations. It is anticipated that these actions will create a healthier and more welcoming San Diego for all residents.

FISCAL IMPACT

Funds for this request are not included in the Fiscal Year 2020-2021 Operational Plan, and there is no fiscal impact associated with this request in Fiscal Year 2020-2021. Funds covering new costs for this Office, in the amount of \$750,000, were included in the Chief Administrative Officer's Recommended Operational Plan for Fiscal Year 2021-2022. We are proposing additional funding to ensure the Office of Immigrant and Refugee Affairs can fulfill the duties outlined in our proposal. If approved, total costs and funding required to staff and maintain the functions of the new Office of Immigrant and Refugee Affairs are estimated to total \$2 million with a projected staffing impact of 5 FTEs, based on similar offices performing these functions in other jurisdictions. This request will be referred to the budget for consideration during Fiscal Year 2021-2022 budget deliberations and adoption. The preliminary recommended funding source would be General Purpose Revenue, but will eventually be determined by program design, duration, and available funding.

BUSINESS IMPACT STATEMENT

N/A

ADVISORY BOARD STATEMENT

N/A

BACKGROUND

San Diego County is a binational, multilingual, and multicultural region, and immigrants and refugees are an integral part of the fabric of our community. According to the ACLU of San Diego and Imperial Counties, over 20 percent of San Diegans were born in other countries, and these residents speak 68 different languages. Immigrants and refugees have a set of unique needs related to their transition into a new community. Coming from diverse backgrounds, many having navigated incredible hardships, immigrants, refugees, and people seeking asylum are resilient and deserve to thrive, regardless of immigration status. Connecting these families and individuals to vital services and resources in various languages and a culturally competent manner is critical to the future of the San Diego region.

Historically, many immigrant populations in San Diego County were denied services based on their immigration status because of misguided state and federal policies built on misinformation and false narratives about immigrants seeking to make San Diego their new home. As a result of these policies, many immigrants remain disconnected and unsure about what services they are eligible for and afraid that engaging with government entities could expose them to countless risks.

SUBJECT: FRAMEWORK FOR THE FUTURE: CREATING AN OFFICE OF IMMIGRANT AND REFUGEE AFFAIRS

These same immigrants and refugees are particularly in need of services based on the life experiences that led them to San Diego. In recent months, the Board of Supervisors has enacted numerous initiatives to prioritize the health, well-being and safety of San Diego residents. These priorities should extend to all immigrant and refugee populations in order to build a stronger and healthier San Diego for all.

That is why we are proposing to create an Office of Immigrant and Refugee Affairs (OIRA). OIRA will serve as a centralized hub for all issues related to immigrants and refugees and connect individuals and families to county services and community resources. Communities have advocated for this office for years to repair some of the damage done by previous policies and administrations. Because we want OIRA to be particularly engaged with the community and be public-facing in a unique way, we are proposing that OIRA be an independent office within the Health and Human Services Agency, within the Department of Homeless Solutions and Equitable Communities, reporting directly to the Community Operations Officer.

The County has established programs for refugees and strong connections with community organizations serving this population. The creation of OIRA will build on these programs and relationships and focus on all immigrants in San Diego County, regardless of immigration status. OIRA will serve as a resource hub for all San Diego immigrants and refugees, where the public can ask questions and seek information and connect to County and community resources. Immigrants and refugees are particularly in need of access to legal resources and, at the same time, susceptible to bad actors taking advantage of these residents. Thus, OIRA should create a list and referral system of trusted purveyors of legal services on topics such as immigration issues (including adjustment of status, DACA, U Visa, and asylum), housing laws, worker's rights, and reporting Notario fraud. Additionally, OIRA will partner with the Public Defender's Office of Assigned Counsel, creating a link for referrals to the Board-created Immigrant Rights Legal Defense Program for detained immigrants facing deportation. Another priority for OIRA will be proactive outreach and education campaigns, ensuring the community is aware of available resources and developing educational "know your rights" campaigns on essential topics, like landlord/tenant and immigration issues, and providing inclusive access to civic processes.

Accessibility is of the utmost importance to ensure that vulnerable communities can make use of critical resources. Therefore, in addition to the physical location, resources should be available via an easily navigable website translated into additional languages and a dedicated phone line with translation. In determining future programming, OIRA should explore opportunities to directly bring mobile services to the communities that need them to achieve greater access. Additionally, OIRA should work directly with the Chief Administrative Officer's office on issues related to language accessibility to increase and improve language access enterprise-wide and on external communications.

The creation of OIRA has been a community priority for years, and keeping the community engaged is integral to meet the needs of the populations being served. Thus, OIRA should continue to build relationships and connections with community stakeholders to obtain input on the needs and gaps in services facing immigrant and refugee populations.

**SUBJECT: FRAMEWORK FOR THE FUTURE: CREATING AN OFFICE OF
IMMIGRANT AND REFUGEE AFFAIRS**

Overall, OIRA will serve as the expert and the convener on issues related to immigrants and refugees in San Diego. In recent months, the County of San Diego has stepped up to support the housing of migrant children at the San Diego Convention Center. This temporary location serves a critical humanitarian purpose, and services and support were put together in a short amount of time following the call of the Biden Administration to our region. The creation of this shelter was only possible because of federal support provided to compassionate community-based organizations and agencies that worked together and are dedicated to caring for these children. In case of future such emergency needs, OIRA can serve as the lead to bring agencies and organizations together to determine how to operationalize such emergency situations related to immigrants and refugees. There also should be an exploration for a flexible space that can be used in case of future incidents that require short-term, emergency housing of migrants.

In its role as an expert on issues related to immigrants and refugees in San Diego, OIRA will research and analyze issues related to immigrants and refugees and annually present to the Board of Supervisors on work accomplished, data gathered, and gaps in services and funding. OIRA will also provide policy suggestions on the needs in the community and how the County could change local, state and federal policy to improve life in San Diego for immigrants and refugees.

Today's action is a critical first step in a long road to creating the most welcoming San Diego County.

We urge your support.

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

Today's proposed action to create an Office of Immigrant and Refugee Affairs supports the Building Better Health and Operational Excellence Strategic Initiatives in the County of San Diego's 2021-26 Strategic Plan by ensuring that all residents have access to the services and resources they need to thrive in San Diego.

Respectfully submitted,



CHAIR NATHAN FLETCHER
Supervisor, Fourth District



VICE-CHAIR NORA VARGAS
Supervisor, First District

ATTACHMENT(S)
N/A



COUNTY OF SAN DIEGO

BOARD OF SUPERVISORS

1600 PACIFIC HIGHWAY, ROOM 335, SAN DIEGO, CALIFORNIA 92101-2470

AGENDA ITEM

COUNTY OF SAN DIEGO

2021 MAY 28 AM 11:51

CLERK OF THE BOARD
OF SUPERVISORS

DATE: June 8, 2021

11

TO: Board of Supervisors

SUBJECT

FRAMEWORK FOR THE FUTURE: STRENGTHENING COUNTY SERVICE DELIVERY AND CONTRACTING (DISTRICTS: ALL)

OVERVIEW

Each year, the County of San Diego delivers billions of dollars of vital public services aimed at building strong and sustainable communities. Nearly a quarter of the county's annual budget is allocated to contracted goods and services, with over \$1.3 billion spent each year in categories such as behavioral health, public health, emergency services, and information technology. The county maintains an active portfolio of 2,200 service contracts with a total value of over \$11.7 billion. The current service delivery approach can be improved to better align with public sector best practices and the county's new framework for the future. We need to shift to a broader framework that asks, "how do we strategically approach service delivery to ensure the best services that lead to better life outcomes for all San Diegans".

While the county provides many services directly through County staff, another key element in the service delivery system are the many experienced, high-quality, and highly skilled contracted organizations. We need to continue to support effective service providers by providing resources and flexibility to implement, monitor, and improve programs over time. This mirrors a broader trend in public sector best practice where simple cost reduction is increasingly giving way to careful, strategic, long-term decision-making. This suggested new framework continues to strongly support the delivery of services at the best possible value but broadens the set of considerations around what constitutes best value. It also moves us towards a service delivery model that is more strategic, transparent, streamlined, client focused, community centered, and outcomes oriented.

Today's action requests the Chief Administrative Officer (CAO) to develop a community engagement process to seek input on the "Draft Service Delivery Framework" documented in

SUBJECT: FRAMEWORK FOR THE FUTURE: STRENGTHENING COUNTY SERVICE DELIVERY AND CONTRACTING

this letter. It also requests that the CAO consult with the Board's Fiscal Subcommittee to refine the community engagement process and then take steps to implement it and incorporate feedback from stakeholders, service providers, and impacted individuals into a report to the Subcommittee. Finally, after completion of the community engagement process, the CAO is requested to develop draft service delivery, contracting, and procurement policies based on feedback from the community engagement process in addition to guidance and refinement from the Fiscal Subcommittee. These draft policies will be delivered to the Fiscal Subcommittee for further refinement and stakeholder input before the final policies come back to the full County Board of Supervisors for consideration.

We urge you to join us in supporting this effort.

RECOMMENDATION(S)

SUPERVISOR TERRA LAWSON-REMER AND CHAIR NATHAN FLETCHER

1. Direct the Chief Administrative Officer to develop a community engagement process and timeline to solicit stakeholder feedback and comments on the "Draft Service Delivery Framework" described in this letter. Outreach and engagement may include public hearings, workshops, meetings with service providers, network associations, impacted individuals, and service organizations, involving both entities who do and who do not currently contract with the county. Report back with the process and timeline within 60 days to the Fiscal Subcommittee for consideration and refinement.
2. Direct the Chief Administrative Officer to implement the community engagement process and create a report summarizing the findings of the community engagement process. Report back to the Fiscal Subcommittee within 60 days from the completion of the community engagement process.
3. Direct the Chief Administrative Officer to develop draft service delivery, contracting, and procurement policies based on feedback from the community engagement process in addition to guidance and refinement from the Fiscal Subcommittee. Assess and evaluate the operational and fiscal impacts as factors in developing and implementing the new policies.
4. Direct the Chief Administrative Officer to refer any costs associated with implementing the above items during Fiscal Year 2021-22 budget deliberations and adoption.

EQUITY IMPACT STATEMENT

To serve the community more equitably, this action seeks to increase transparency and provide an inclusive service delivery process that leads to better outcomes. The action will expand opportunities for underrepresented communities as well as for a diversity of service delivery organizations, including smaller community-based entities.

SUBJECT: FRAMEWORK FOR THE FUTURE: STRENGTHENING COUNTY SERVICE DELIVERY AND CONTRACTING

FISCAL IMPACT

Funds for this request are not included in the Fiscal Year 2020-21 Operational Plan, and there is no fiscal impact associated with this request in Fiscal Year 2020-21. If approved, Fiscal Year 2021-22 initial costs and revenue required to staff and support the Draft Service Delivery Framework are estimated to be \$275,000 with a projected staffing impact of 2.0 FTEs in the Department of Purchasing and Contracting. This request will be referred to budget for consideration during the Fiscal Year 2021-22 budget deliberations and adoption. The funding source will be Department of Purchasing & Contracting Internal Service Fund Fund Balance. There will be no change in net General Fund costs and 2.0 additional staff years.

There may be operational impacts to departments for increased contract management as these policy changes are implemented. These potential impacts and resultant costs are unknown at this time. Additional fiscal impacts to departments unknown at this time include potential increases to contract costs which may result from changes to contracting policies. Staff will return to your board with future staffing recommendations as appropriate through the annual budget process. The funding sources are anticipated to be a combination of program revenues and general purpose revenues.

BUSINESS IMPACT STATEMENT
N/A

ADVISORY BOARD STATEMENT
N/A

BACKGROUND

Each year, the County of San Diego delivers billions of dollars of vital public services aimed at building strong and sustainable communities. Nearly a quarter of the county's annual budget is allocated to contracted goods and services, with over \$1.3 billion spent each year in categories such as behavioral health, public health, emergency services, and information technology. The county maintains an active portfolio of 2,200 service contracts with a total value of over \$11.7 billion.

For decades, the county's approach to service delivery, contracting, and procurement has been dominated by the approach of "better, cheaper and faster". This has led to outsourcing functions that are typically aligned with County operations. The importance of price can also crowd out other important policy considerations, such as high-quality employment standards, local hiring, cultural competency, and innovation that could lead to better and more reliable services for all San Diegans, greater economic justice, and better alignment with the County's *Live Well San Diego* vision.

SUBJECT: FRAMEWORK FOR THE FUTURE: STRENGTHENING COUNTY SERVICE DELIVERY AND CONTRACTING

The current approach can be improved to better align with public sector best practices and the county's new framework for the future. We need to shift to a broader framework that asks, "how do we strategically approach service delivery to ensure the best services that lead to better life outcomes for all San Diegans." This mirrors a broader trend in public sector best practice where simple cost reduction is increasingly giving way to careful, strategic, long-term decision-making. Indeed, this more comprehensive approach often results in long-term cost savings due to reduced staff turnover and increased productivity. This proposed new framework continues to strongly support the delivery of services at the best possible value but broadens the set of considerations around what constitutes best value.

We recognize that organizations and businesses that contract with the county are integral partners and share in our commitment to build healthy, safe, and thriving communities. These entities face many challenges, such as limits required by inter-governmental funding streams, like Medi-Cal, that limit the rates paid for professional services, as well as administrative burdens. In response, many service providers have had to pursue philanthropic funding to complement their budgets and ensure high quality and tailored services to meet individuals needs of residents on the county's behalf.

The COVID-19 crisis has made the county's delivery of critical services more important than ever. Even as the case rates begin to decline, county services will continue to play an essential role in COVID-19 emergency response as well as the long-term roadmap to recovery. In addition, as an anchor institution and third largest employer in the region, the county's policies around service delivery, contracting, and purchasing play a key role in the regional economy. We must leverage our service delivery portfolio to accelerate a sustainable and just recovery: promoting highquality employment standards, robust local hiring, outcomes-based monitoring and reporting, and a deep commitment to transparency and accountability. This proposal aims to utilize our role and influence as a responsible employer and funder to promote good jobs across the region that pay competitive wages, receive fair benefits and provide good worker conditions.

Today's action outlines a framework to make County service delivery more strategic, transparent, streamlined, comprehensive, and outcomes oriented. This letter also calls for a strong community engagement process to listen to stakeholders, service providers, and impacted individuals. New policies will be developed and refined over the coming months with significant stakeholder input and finalized policies will come back to the full County of San Diego Board of Supervisors for consideration. We anticipate the new policies would be adopted for the 2022-23 fiscal year.

Section 1: Draft Service Delivery Framework

The following draft framework contains key elements on service delivery, contracting, and procurement. The community engagement process should obtain input and feedback on this draft framework. **Service Delivery Assessment Tool** - the following outlines elements of the

SUBJECT: FRAMEWORK FOR THE FUTURE: STRENGTHENING COUNTY SERVICE DELIVERY AND CONTRACTING

proposed tool that the county can use to guide strategic decision-making when determining the best service delivery model.

- a. **Capacity and Timeliness:** can the service be performed adequately, competently, and satisfactorily by County staff, or is it possible to recruit such County personnel to perform the service for the period of time the county needs the service?
 - b. **Strategy:** is the service part of a long-term County priority or line of business where there are significant strategic or organizational benefits to developing internal expertise and/or a workforce pipeline in this subject area?
 - c. **Technical Nature:** is the service of an extraordinary professional or technical nature that is strategically and operationally best served by third-party firms?
 - d. **Conflicts of Interest:** is the service one that may have potential conflicts of interest that make the service more appropriate for contracted service delivery?
 - e. **Performance:** which service delivery method is more likely to result in the highest quality and result in the best outcomes for the target population, both in the short and long-term?
 - f. **Innovation:** are there new and unique service delivery options, including partnership, collaborations, and crowdsourcing that can result in program innovation. Can innovative service delivery be paired with robust monitoring and evaluation?
 - g. **Cost:** which service delivery method will result in the best value? When considering service delivery methods, proposals should consider the full costs of service delivery models to ensure parity in employment, wage, and benefit standards, and are in line with industry and County compensation levels. Further, the cost comparison should include direct, indirect, and transitional costs.
 - h. **Geography:** is the service one that would be best delivered through a county-wide (centralized) effort or through localized effort at a regional, sub-regional, community, or neighborhood scale? What service delivery method would more likely result in the community's highest quality and best outcomes to be served?
2. **Responsible Contracting Policies** - the following policy elements and program concepts should be considered to ensure responsible contracting.
- a. **Performance-based Contracting** -The Department of Contracting and Procurement could partner with the new Office of Evaluation, Performance, and Analytics to provide feedback and input on monitoring and evaluation, and performance-based contracting within the service delivery philosophy, organizational culture, and day-to-day contract management operations. As part of this effort, develop a plan to maximize service delivery innovation, flexibility, and learning within the contract monitoring process to prioritize the needs of clients and communities and delivering services that lead to improved outcomes.

SUBJECT: FRAMEWORK FOR THE FUTURE: STRENGTHENING COUNTY SERVICE DELIVERY AND CONTRACTING

For example, where appropriate, contracts could incorporate concepts like Continuous Quality Improvements (CQI) and embed periodic reviews of the service delivery methodology. In this way, service providers can periodically have the opportunity to submit recommendations to the county for mid-course program adjustments that would lead to greater efficiency and nimbleness, better services, and better outcomes.

- b. **Worker Retention Policy** - qualifying service contracts should provide for the continuation of work for eligible employees working under a contract that is closing. The successor contractor should retain eligible employees from the predecessor contractor for a minimum period of time under the new contract.
- c. **Wage and Benefits Standards Policy** - qualifying service contracts should pay employees a competitive wage, adhere to fair work week scheduling policies, and provide benefits in line with industry and County standards.
- d. **Culturally Specific and Responsive Services** - evaluating service contract proposals in light of cultural humility or linguistically specific services required to appropriately reflect and respond to the needs of the communities being served.
- e. **Diversity and Inclusivity in Contracting Plan** - ensure full access among all potential service providers for business opportunities and encourage supplier diversity to address any potential disparities in county contracting. This could include:
 - **Education and Capacity Building** – “How to do business with the County workshops” and small business advisory service, technical assistance, and other resource support, especially for smaller community-based organizations who may find County contracting challenging due to requirements.
 - **Outreach** – Ensure diverse and underrepresented communities are included in future opportunities.
 - **Community Engagement** – Assess and identify potential barriers to enhancing access for underrepresented portions of the service provider and business community. Convene the Inclusivity in Contracting Group (ICG) to inform and guide the Diversity and Inclusivity in Contracting Plan.
 - **Regional Collaboration** – Establish regional baseline data and goals with other San Diego anchor institutions and business associations and assess the regional provider landscape to identify opportunities to continue to encourage diversity in contracting.
- f. **Minimum Qualifications Program** - firms must demonstrate high-quality employment and work product to be considered for service contract proposals. The program should consider elements like:
 - licensing and bonding

SUBJECT: FRAMEWORK FOR THE FUTURE: STRENGTHENING COUNTY SERVICE DELIVERY AND CONTRACTING

- wage violations, hour violations, or OSHA violations,
- compliance with all federal, state, and local regulations,
- history of violation of previous policy or contracts

3. Accountability and Transparency

While the county provides public access to individual contracts through the BuyNet digital platform, portfolio-wide summary data is not easily accessible. In the spirit of accountability and public transparency, the Department of Procurement and Contracting should develop a digital platform and regular reports that are easy to access by the public, and searchable. Whether it's firms competing with one another, reporters, government watchdog groups, or members of the public who want to know where their tax dollars are going, the public must have easy and user-friendly access to this information. Such transparency reports should consider information such as: basic vendor information such as entity names, related entities, Doing Business As names (DBA), corporation legal status (for example: nonprofit, s-corporation, governmental agency, etc.), current operational leadership and board of directors, and have searchable options such as procurement solicitation documents, list of all agencies competing for procurement and awardees without having to officially log into the system.

Section 2: Process for Developing the Board Policies

The following list outlines anticipated next steps in the process for robust community and stakeholder engagement, Subcommittee refinement, and drafting of new Board policies.

1. **Community Engagement Process Development:** The Chief Administrative Officer should develop a robust community and stakeholder outreach process to seek input on the "Draft Service Delivery Framework". This process may include public hearings, forums, roundtables, and meeting with service providers, network associations, impacted individuals, and service providers who do and do not currently contract with the county. Staff should consider the best method for securing robust and honest feedback from service providers, including third-party facilitators and anonymous surveys.

The Fiscal Subcommittee members will provide on-going guidance and direction to the Chief Administrative Officer and staff to refine and provide additional guidance on the community engagement process.

2. **Community Engagement Process Implementation:** The Chief Administrative Officer should implement the final community engagement process and create a report summarizing the findings of the community engagement process, including feedback,

SUBJECT: FRAMEWORK FOR THE FUTURE: STRENGTHENING COUNTY SERVICE DELIVERY AND CONTRACTING

comments, and suggested revisions. Report back to the Board Fiscal Subcommittee within 60 days from the completion of the engagement process.

3. **Drafting Board Policies:** Upon completing the community engagement process and community engagement report, the Chief Administrative Officer should draft consolidated board policies on service delivery, contracting, and procurement. This process should include an assessment of the impacts of new board policies. A comprehensive evaluation of the County service delivery compared to other similar counties should be conducted in advance of drafting the policies. Report back to the Fiscal Subcommittee with the draft policies for further guidance and refinement.
4. **Fiscal Subcommittee Refinement and Engagement:** The Fiscal Subcommittee will further refine the draft policies providing additional guidance and direction. The finalized proposed board policies would be recommended to the full County of San Diego Board of Supervisors for consideration and adoption.
5. **Board of Supervisors Consideration:** At the recommendation of the Fiscal Subcommittee, the full Board will consider the new board policy for adoption. It is anticipated that the new board policies would be in effect no earlier than FY 2022-23

LINKAGE TO THE COUNTY OF SAN DIEGO STRATEGIC PLAN

Today's proposed actions support the Live Well San Diego Initiative in the county's 2020-2025 Strategic Plan, and its vision for a San Diego that is Building Better Health, Living Safely and Thriving by ensuring that policies and practices related to County service delivery and contracting meet the needs of clients and communities.

Respectfully submitted,



TERRA LAWSON-REMER
Supervisor, Third District



NATHAN FLETCHER
Chair, Fourth District

ATTACHMENT(S)
N/A

Presentation: FY 2021-22

CAO Recommended Operational Plan

Luke Bergmann, Director, Behavioral Health Services

Nadia Privara, Chief Agency Operations, Behavioral Health Services



STRATEGIC PRIORITIES



DEPARTMENT OVERVIEW

Working across four domains – Contractor, Health Plan, Direct Service Provider and Public Health Entity – Behavioral Health Services ensures optimal behavioral health for the residents of San Diego County.



MISSION

To make people's lives healthier, safer and self-sufficient by delivering essential behavioral health services throughout San Diego County.



VISION

Complete the transformational shift from a model of care driven by crises, to one steered by chronic or continuous care and prevention through the regional distribution and coordination of resources.



ACCOMPLISHMENTS AND LOOKING FORWARD



Key Accomplishments in FY2020-21

- COVID-19 Response
- Advancements in the Continuum of Care
 - Crisis and diversionary services
 - Chronic and continuous care
 - Care coordination

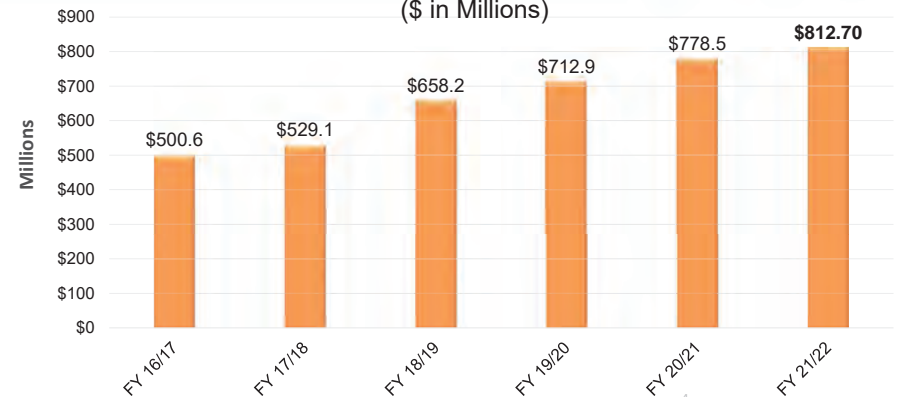
Looking Forward

- Population Health approach to advance Harm Reduction Strategy
- Expansion of data sciences capacity
- Implementing the Triple Aim

FY2021-22 CAO RECOMMENDED BUDGET



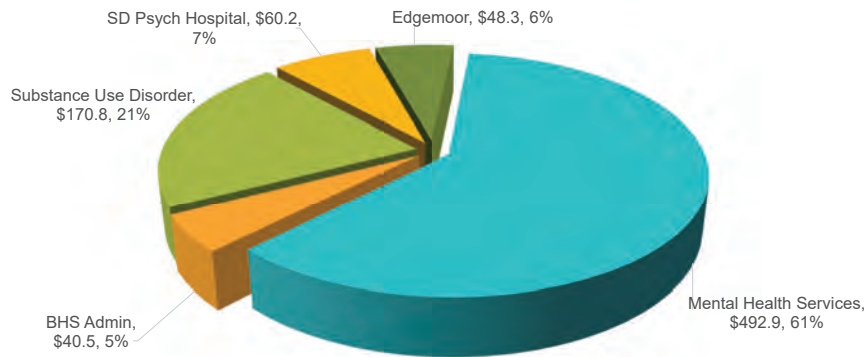
BHS Recommended Budget (\$ in Millions)



FY2021-22 CAO BHS RECOMMENDED BUDGET

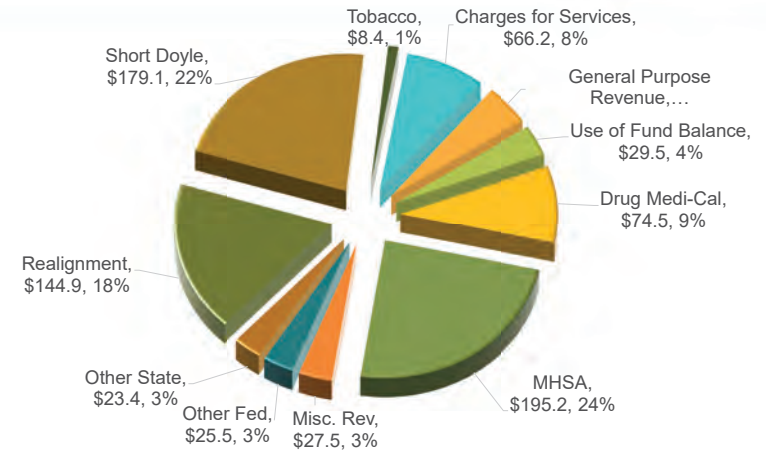


TOTAL BHS Recommended Budget: \$812.7 MILLION



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FY2021-22 BHS REVENUE SOURCES



6

FY2021-22 BHS INVESTMENTS



BHS PROPOSED BUDGET: \$812.7M

- **Total increase of \$34.2M in Fiscal Year 2021-22**
- **Key Behavioral Health Service Delivery Investments**
 - \$10M Redesign of biopsychosocial rehabilitation programs (BPSR)
 - \$7.4M Crisis stabilization services in the North Coastal and South Regions
 - \$6M Augment mental health services to increase access
 - \$5.5M Rate increases and cost of living (COLA) adjustments to mental health programs
 - \$5M Mobile Crisis Response Team (MCRT) expansion
 - \$4.2M One-time IT projects to modernize electronic health records and data sharing
 - \$20.7M for 86 full-time County employees
 - \$24.6M reduction of one-time costs

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FY2021-22 BUDGET TIMELINE



Budget Hearings	May 6, 2021	• CAO Recommended Operational Plan released to public
	May 26-27, 2021	• CAO Recommended Operational Plan presentations • 9am-12pm and 1pm-4pm
	June 14, 2021	• Presentation & public hearings on CAO Recommended Budget • 9am
	June 16, 2021	• Presentation & evening public Hearing on recommended Budget • 5:30pm
	June 23, 2021	• Last day for written testimony to Clerk of the Board
	June 25, 2021	• Revised Recommended Budget available to public
	June 29, 2021	• Budget Deliberations and Adoption • 2pm

CLICK **HERE** TO VIEW ONLINE



HHS FINANCIAL UPDATE
ADVISORY BOARD MEETINGS
MAY 2021



1

AGENDA

ECONOMIC
UPDATES

FY 21-22 CAO
REC BUDGET

UPCOMING
BUDGET
EVENTS

2

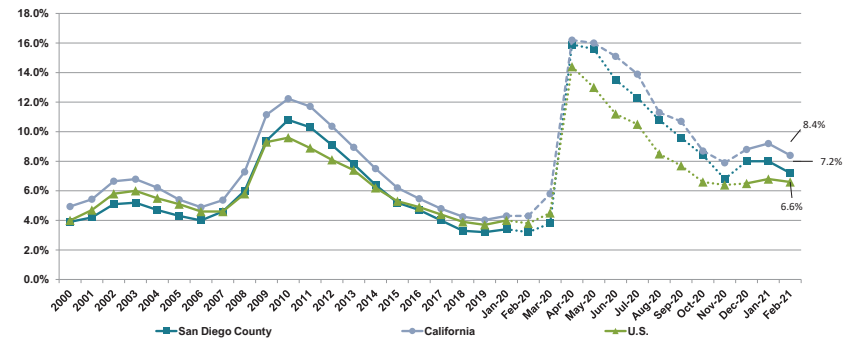
ECONOMIC UPDATES



3

UNEMPLOYMENT RATES

Unemployment Rate Comparison
2000 through 2021

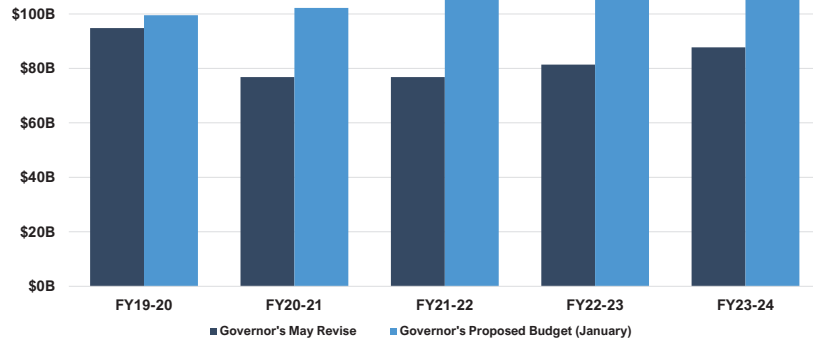


San Diego County unemployment rate as of February 2021 = 7.2%

Notes: Data not seasonally adjusted; 2000–February 2021 actuals.
Sources: Actuals: California Employment Development Department, US Bureau of Labor Statistics

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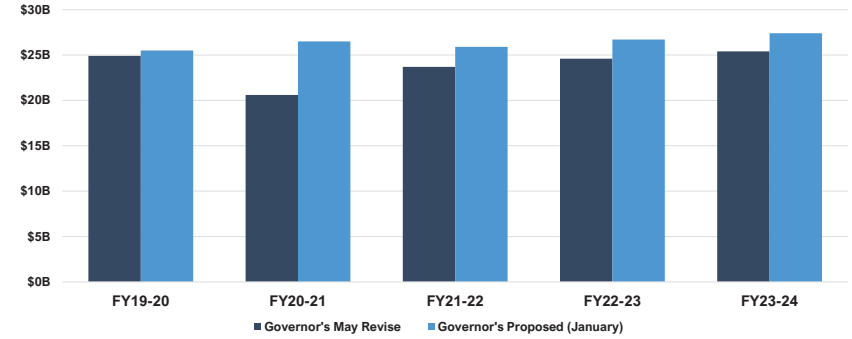
STATE PERSONAL INCOME TAX REVENUE



Source: State of California, Governor's May Revise Budget 20-21 and Governor's Proposed Budget (January) 21-22

5

CALIFORNIA SALES AND TAX REVENUE

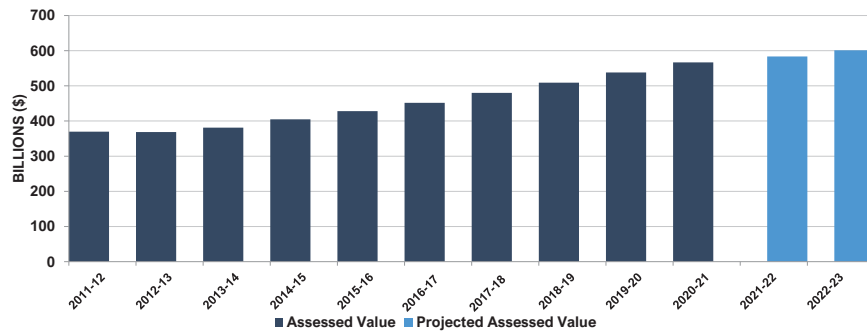


Source: State of California, Governor's May Revise Budget 20-21 and Governor's Proposed Budget (January) 21-22

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LOCALLY ASSESSED SECURED PROPERTY VALUES

Fiscal Year 2011-12 to Fiscal Year 2022-23



Note: The projected locally assessed secured values assume a 3.0% growth rate for Fiscal Year 2021-22 and 3.0% growth rate for Fiscal Year 2022-23.
Source: San Diego County Auditor and Controller

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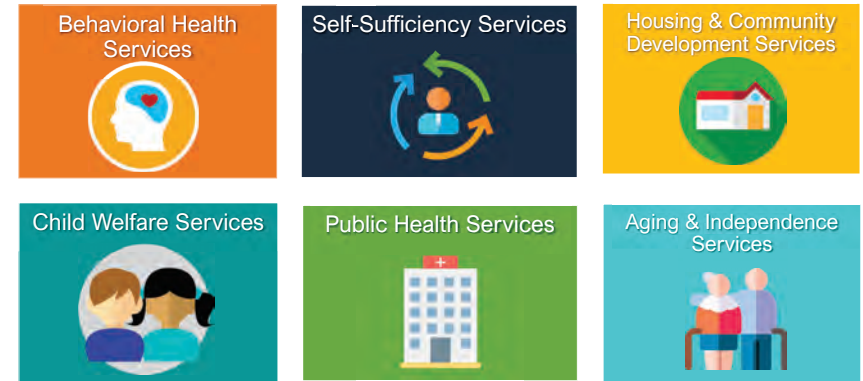
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CAO RECOMMENDED BUDGET FY 21-22



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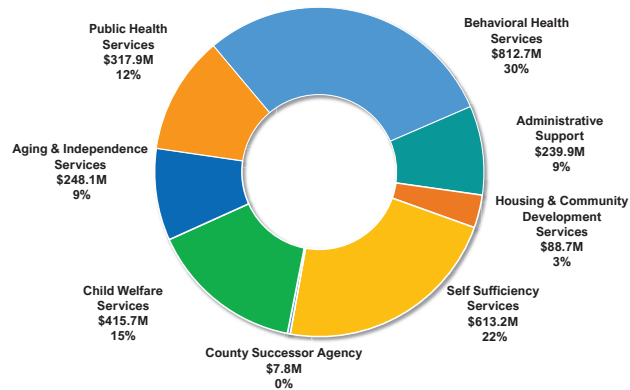
HEALTH AND HUMAN SERVICES AGENCY



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FY 2021-22 CAO RECOMMENDED BUDGET

HHSA BUDGET BY DEPARTMENT: \$2.7 BILLION

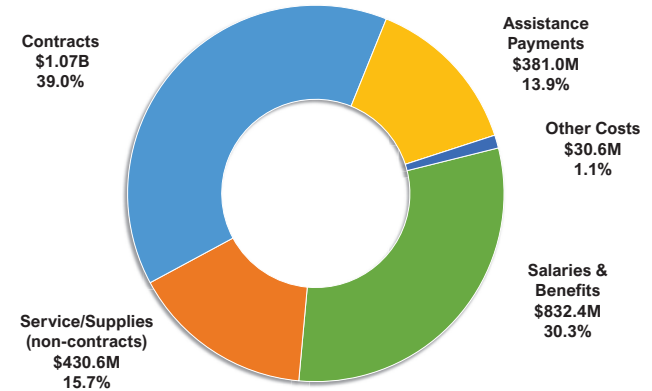


Increase of \$211.4 Million from FY2020-21 Adopted Budget

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FY 2021-22 CAO RECOMMENDED BUDGET

HHSA BUDGET BY CATEGORY: \$2.7 BILLION

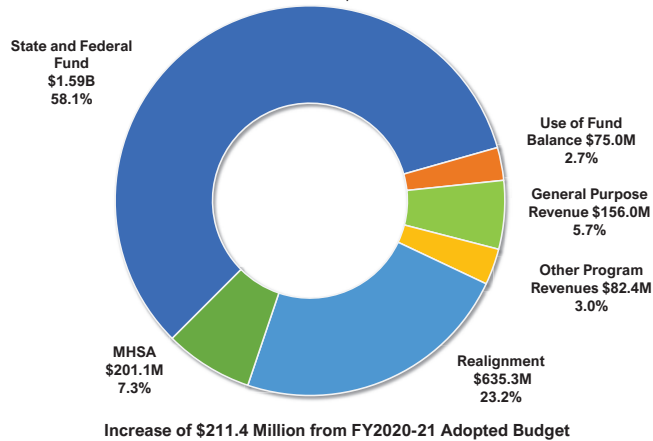


Increase of \$211.4 Million from FY2020-21 Adopted Budget

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FY 2021-22 CAO RECOMMENDED BUDGET

HHSA REVENUES: \$2.7 BILLION



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FY 2021-22 CAO RECOMMENDED BUDGET

BUDGET BY DEPARTMENT: \$2.7 BILLION

(In Millions)

Department	FY 2020-21 Adopted Budget	FY 2021-22 CAO REC Budget	Change	% Change
Behavioral Health Services	\$778.5	\$812.7	\$34.2	4.4
Self-Sufficiency Services	\$550.8	\$613.2	\$62.4	11.3
Child Welfare Services	\$400.3	\$415.7	\$15.4	3.8
Administrative Support	\$312.3	\$239.9	(\$72.4)	(23.2)
Aging & Independence Services	\$192.2	\$248.1	\$55.9	29.0
Public Health Services	\$182.0	\$317.9	\$135.9	74.6
Housing & Community Development Services	\$108.7	\$88.7	(\$20.0)	(18.4)
County Successor Agency	\$7.8	\$7.8	\$0.0	0.0
Total:	\$2,532.6	\$2,744.0	\$211.4	8.3

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FY21-22 CAO RECOMMENDED STAFFING BY DEPARTMENT

7,083.5 HHSA POSITIONS

Department	FY 2020-21 Adopted Budget	FY 2021-22 CAO REC Budget	Change	%Change
Self-Sufficiency Services	2,529.0	2,629.0	100.0	4.0%
Child Welfare Services	1,492.0	1,530.0	38.0	2.5%
Behavioral Health Services	1,006.5	1,092.5	86.0	8.5%
Public Health Services	709.0	729.0	20.0	2.8%
Administrative Support	457.0	481.0	24.0	5.3%
Aging & Independence Services	449.0	492.0	43.0	9.6%
Housing & Community Development Services	130.0	130.0	0.0	0.0%
Total:	6,772.5	7,083.5	311.0	4.6%

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HHSA FY 21-22 BUDGET PRIORITIES

- Pandemic Response
- Behavioral Health Service Delivery & Public Health Infrastructure
- Homelessness & Affordable Housing
- Strengthening Children & Families and Supporting Seniors



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HHSA FY 21-22 BUDGET PRIORITIES

TOTAL INCREASE: \$211.4 MILLION	
Pandemic Response	\$104.9
Behavioral Health Service Delivery & Public Health Infrastructure	\$53.0
Homelessness & Affordable Housing	\$7.1
Strengthening Children & Families and Supporting Seniors	\$65.6
Other Adjustments Including Completion of Prior Year Projects	\$(19.2)
TOTAL CHANGE	\$211.4

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PANDEMIC RESPONSE

\$104.9 Million increase

COVID-19 direct response efforts:

- T3 Strategy
- Vaccinations
- Great Plates
- American Rescue Plan Framework



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COVID-19 AMERICAN RESCUE PLAN ACT (ARPA) & STIMULUS FUNDING FRAMEWORK COMPONENTS

(In Millions)

Components	Total	ARPA	Other Funding
Prior & Ongoing County Response Costs	\$ 391.7	\$ 232.5	\$ 159.2
Food Assistance	87.4	20.0	67.4
Mental Health Services	30.0	30.0	-
Rental Assistance	107.0	-	107.0
Senior & Youth Services	10.0	10.0	-
Childcare Subsidies	10.0	10.0	-
Small Business Stimulus Payments	50.0	50.0	-
Homeless Services	85.0	85.0	-
Direct Stimulus Payments	40.0	40.0	-
Infrastructure	46.0	46.0	-
Legal Services	15.0	15.0	-
Premium Pay for Gov Essential Workers	40.0	40.0	-
Family Leave/FFCRA	9.0	-	9.0
Total Initial Use of ARPA Funds	\$ 921.1	\$ 578.5	\$ 342.6
09/21 – 12/22 Health/Economic Recovery	\$ 75.0	\$ 75.0	-
Grand Total	\$ 996.1	\$ 653.5	\$ 342.6

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BEHAVIORAL HEALTH SERVICE DELIVERY AND PUBLIC HEALTH INFRASTRUCTURE

\$53.0 Million increase

- Additional 84 staff years for BHS and 20 staff years for PHS
- Behavioral health crisis response and stabilization, redesign of biopsychosocial recuperation programs, and Mobile Crisis Response Teams
- Public Health Grant Initiatives



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HOMELESSNESS/ AFFORDABLE HOUSING \$7.1 Million increase

- Additional 19 staff years
- Support & Care Coordination to veterans, youth and high need individuals
- Emergency Shelter needs
- Affordable Housing initiatives
- CalWORKs Housing Support program



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STRENGTHENING CHILDREN & FAMILIES AND SUPPORTING SENIORS \$65.6 Million increase

- Additional 188 staff years
- Increased critical Self-Sufficiency Public Assistance services
- Office of Immigrant and Refugee Affairs
- Cash assistance programs
- Increased support to households with food nutrition, emergency shelter and rapid re-housing



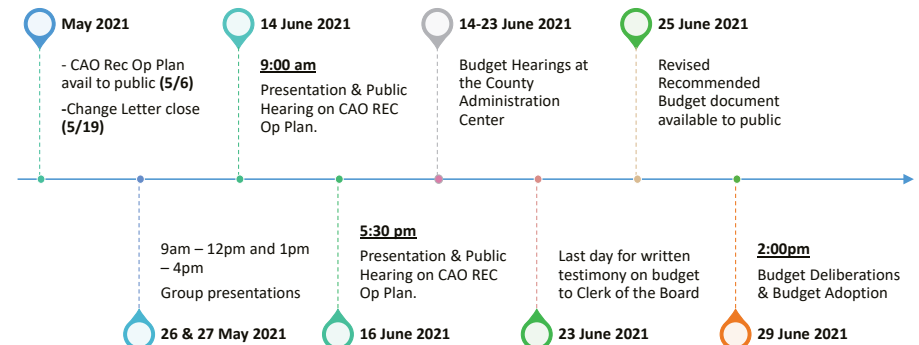
22

UPCOMING BUDGET EVENTS



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OPERATIONAL PLAN- KEY DATES



24



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QUESTIONS

Amy Thompson, Executive Finance Director
Amy.Thompson@sdcounty.ca.gov
Office: (619) 515-6923

Ardee Apostol, Assistant Finance Director
Ardee.Apostol@sdcounty.ca.gov
Office: (619) 338-2602

THANK YOU!

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NOTICE OF PUBLIC HEARING

The County of San Diego invites you to view and submit your comments regarding the [Chief Administrative Officer's Recommended Operational Plan \(budget\)](#) online through [eComment](#).

Noticed Public Hearings will be conducted on the Chief Administrative Officer's Recommended Operational Plan for Fiscal Year 2021-22, including Enterprise Funds, County Service Areas, Permanent Road Divisions, Flood Control District, Lighting and Maintenance Districts, Redevelopment Successor Agency, the Sanitation District, and In-Home Supportive Services Public Authority; and the Chief Administrative Officer's Fiscal Years 2021-22 and 2022-23 Recommended Operational Plan. Hearings are scheduled as follows:

- **Monday, June 14, 2021, 9:00 a.m.** Budget Presentation and Public Testimony on the Budget
- **Wednesday, June 16, 2021, 5:30 p.m.** Public Testimony on the Budget
- **Tuesday, June 29, 2021, 2:00 p.m.** Budget Deliberations and Adoption

Please note that the Clerk of the Board of Supervisors must receive all comments no later than 5:00 p.m., Wednesday, June 23, 2021, when Budget Hearings formally close.

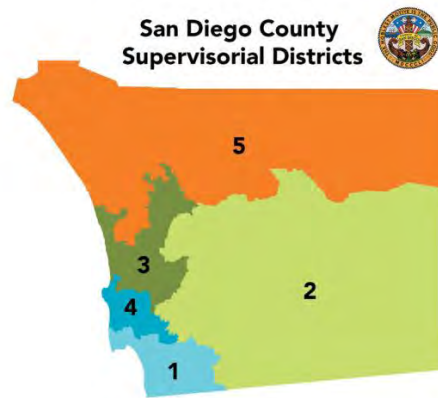
Board of Supervisors Meeting Public Participation

A limited number of people are allowed to attend Board of Supervisors meetings and provide testimony in person as long as certain COVID-19 safety measures are followed. You can also continue to join the meeting virtually. Please see the information [posted online](#) and linked below for ways to voice your opinion on agenda items.

Supporting documentation (including attachments referenced in the agenda) is available for viewing on the [Clerk of the Board Agenda web page](#). To access this documentation, select the highlighted Board Meeting date on the Board of Supervisors Agenda Calendar, select the meeting type, and click, "Submit." For information about the Board of Supervisors meetings, please visit the [Meeting Information](#) page. If you experience technical difficulties, please contact our office at (619) 531-5434.



County's Redistricting Commission to Hold Informational Meetings



The San Diego County Independent Redistricting Commission (IRC) will hold a series of virtual meetings on why redistricting matters in San Diego County.

Redistricting takes place every 10 years and uses U.S. Census data to ensure each supervisorial district contains roughly the same number of people. Boundary lines can also shape a community's ability to elect the representative of their choice.

Commissioners from each of the County's five supervisorial districts will give the informational presentations. Everyone is welcome to attend any or all of the virtual meetings.

The IRC Education Tour meetings take place:

- June 3 from 12:00-1:00 pm (District 5)
- June 8 from 6:00-7:00 pm (District 4)
- June 16 from 4:00-5:00 pm (District 1)
- June 23 from 12:00-1:00 pm (District 3)
- June 30 from 12:00-1:00 pm (District 2)

For more information and a meeting link, RSVP at the [IRC website](#). To request live language interpretation, call (619) 409-3003 or send an email at least 24 hours in advance of the meeting to redistricting@sdcounty.ca.gov.

The meetings are informational only and not Independent Redistricting Commission hearings. Commissioners cannot accept any public input on maps, district boundaries or communities of interest.

The public can give their input at the [redistricting website](#), email redistricting@sdcounty.ca.gov or mail comments to: Independent Redistricting Commission, c/o Clerk of the Board, 1600 Pacific Highway, Room 402, San Diego, CA 92101. Input will also be accepted at a series of public hearings set to begin in mid-summer.

Redistricting maps must be completed by Dec. 15, 2021.

County of San Diego – Health and Human Services Agency
MHP/DMC-ODS External Quality Review Recommendations
 FY 2020-21

Background

The California Department of Health Care Services (DHCS) requires an annual, independent external evaluation of State Medicaid Managed Care Organizations (MCOs) by an External Quality Review Organization (EQRO). The External Quality Review (EQR) is the analysis and evaluation by an approved EQRO of aggregate information on the MCO's access, timeliness, and quality of health care services. This document provides the recommendations brought forth by the EQRO for the MHP and DMC-ODS during the 2021 reviews held January 5-7, 2021 (MHP) and March 2-4, 2021 (DMC-ODS).

(EQR Annual Reports are available in [Section 6.4](#) of the BHS Technical Resource Library)

EQRO Recommendations for MHP, FY 2020-21

	Domains	Recommendations
1	PIP Status	The MHP is advised to use CalEQRO technical assistance (TA) for both PIPs throughout the design and implementation process.
2	Access to Care	The MHP should prioritize addressing the level of care pressure across the system that was identified by the MHP and contractor staff.
3	Timeliness of Services	Review and refine data reliability and calculations for timeliness measures, particularly for urgent appointments.
4	Quality of Care	Develop a focused, centralized quality improvement (QI) process related to medication monitoring in order to identify system-level issues that should be addressed.
5	Information Systems	Include Optum in strategizing the complex training requirements for staff that would keep them competent on both the legacy EHR and the new Millennium platform at the same time.
6	Structure and Operations	Investigate and address Community Based Organizations' (CBO) concerns regarding inconsistencies in contract monitoring and communication with contract officers.

EQRO Recommendations for DMC-ODS, FY 2020-21

	Domains	Recommendations
1	PIP Status	San Diego has established baseline data for a Non-Clinical PIP and plans to begin interventions the end of March 2021. San Diego needs to assure this timeline is met and continues work on their PIPs and, if needed, requests additional TA.
2	Access to Care	San Diego needs to put in place a monitoring system to assure that all patients receive education and information about medication assisted treatment options available to them during assessment and treatment planning sessions. Also, that all levels of care make medication assisted treatment options available for those with opioid or alcohol use disorders as supplements to treatment if clinically indicated.
3	Timeliness of Services	San Diego should continue to work with the criminal justice system to be able to continue medications to inmates incarcerated when they enter the system with current prescriptions.
4	Quality of Care	San Diego needs to update the Cultural Competence Plan to include more specific SUD goals/objectives and evaluate them each year.
5	Information Systems	Continue to automate SanWITS workflow processes to support health providers' use of the EHR system to include client prescriptions and lab results history.
6	Structure and Operations	Continue plans to expand the continuum of care with Request for Proposals (RFPs) as indicated with 3.3 residential treatment and TAY services.

County of San Diego – Health and Human Services Agency
MHP External Quality Review Report Summary
 FY 2020-21

Background

The California Department of Health Care Services (DHCS) requires an annual, independent external evaluation of State Medicaid Managed Care Organizations (MCOs) by an External Quality Review Organization (EQRO). The External Quality Review (EQR) is the analysis and evaluation by an approved EQRO of aggregate information on the MCO's access, timeliness, and quality of health care services. This document is a summary of the findings from the San Diego MHP review conducted virtually from January 5-7, 2021.

Source: (full report on [Section 6.4](#) of the BHS Technical Resource Library)
 FY 2020-21 Medi-Cal Mental Health External Quality Review San Diego MHP Final Report. Behavioral Health Concepts, Inc., 2021.

Key Findings on Performance Measures CY 2019

- BHS served an unduplicated total of 35,495 clients in CY 2019. Compared to [2019 Census population estimates](#), clients who are African American appear to be overrepresented in the MH system (9.2% in system vs 5.5% SD County population).
- The unduplicated count of average monthly Medi-Cal clients is 841,686. Compared to the percentage of clients served by BHS, clients who are African American are overrepresented in the MH system (9.2% in system vs 5.9% of Medi-Cal client population). Clients who are White are also overrepresented in the MH system (30.2% in system vs 19.6% of Medi-Cal client population).
- The highest percentage of clients served in a threshold language was for Spanish (13.8%), Arabic at a distant second (2.8%).
- The overall penetration rate for CY 2019 is 4.22%, consistent with the previous CY and with other large counties in the state. Overall ACB is \$4,717; lower than the previous CY (\$5,418) and lower compared to other large counties (\$6,219). It is also noted that BHS uses a different method from EQRO in calculating the penetration rate.
- The distribution of clients in the diagnostic categories served in BHS appear to be consistent with those served in the State, except for the Psychosis category (20% in BHS vs 16% in State).
- High Cost Beneficiaries/HCB by total claims (with approved claims of more than \$30,000/year) make up 23.09%; which is lower than previous CY (32.48%), and is also lower than the Statewide 28.65%. The average approved claims per HCB is \$51,557; consistent with the Statewide \$51,883.
- Psychiatric inpatient utilization decreased significantly to 10,432 total inpatient admissions (from 13,893 in previous CY). Average LOS days decreased by almost 2 days from previous CY (7.95 days) and is consistent with Statewide average of 7.80 days. Rehospitalization rates (7- & 30-day) are lower compared to the State rate by 4 and 7 percentage points (8% and 12%).

Strengths & Opportunities for Improvement

Domains	Strengths	Opportunities for Improvement
Access to Care	<ul style="list-style-type: none"> Quick pandemic response – services and communication Full range of services at the COVID-19 Public Health Hotels for clients who are homeless Well-designed website, with up-to-date information in multiple languages. Developing the Community Experience Project dashboard, with flexible queries regarding health equity information to facilitate data-driven service planning and resource allocation. Taken proactive steps to identify and address internal challenges with underserved populations. 	<ul style="list-style-type: none"> Beneficiaries do not have online access to their health records through a PHR feature provided within the EHR, a beneficiary portal, or a third-party PHR. Contract providers reported feeling increased pressure to move beneficiaries to lower levels of care regardless of acuity and service needs, increasing pressure on caseloads.
Timeliness of Services	<ul style="list-style-type: none"> Timeliness Journal captures monthly and annual averages for the entire SOC, by each service delivery entity, for MH & psychiatry services, for adults/older adults and children separately. Psychiatry timeliness and no-show rates are well-within acceptable standards. A centralized contract for psychiatry ensures appointments are available and encourages clients to keep appointments. 	<ul style="list-style-type: none"> Current EHR does not track timeliness for urgent appointments for existing clients (by time), nor capture new clients who are seen the same/next day, whose service is coded as an assessment at the time of the initial call. The data provided regarding follow-up after inpatient discharge warrants review for accuracy and validity.

County of San Diego – Health and Human Services Agency
MHP External Quality Review Report Summary
 FY 2020-21

Quality of Care	<ul style="list-style-type: none"> Cultural competency incorporated into all activity related to internal relations and service delivery. Variety of reports provide data reviewed by multiple committees, program managers, clinical staff, and MHP leadership. CORs review data routinely with their assigned community-based organizations. QRC includes the full range of MHP, contractor, client, and community stakeholders and recommends improvement needs based on reports and other info brought to the meetings. Engages in small-scale PDSA initiatives based on data from the reports. Provider handbook specifies requirements for med monitoring, including measures to be tracked and a requirement to have a med monitoring committee. 	<ul style="list-style-type: none"> The QI process is complex; it is not clear that there is a central clearing house that tracks QI activity across the system in a predictable and orderly fashion. A focused or centralized QI process related to medication monitoring would identify system-level issues that should be addressed.
Beneficiary Outcomes	<ul style="list-style-type: none"> Network of wellness centers modeled after clubhouses, enhanced by wide variety of classes and support groups. Highly praised by stakeholders as an effective alternative to standard day treatment. CPS reports include trends, interpretation, and brief summaries in English & Spanish. 	<ul style="list-style-type: none"> Provided no evidence that the results of the CPS or the Youth Satisfaction Survey are reviewed with the BHAB.
Foster Care	<ul style="list-style-type: none"> Tracks the required SB 1291 and HEDIS measures; reviews data and evaluates performance. Of the 12 STRTPs, 5 have obtained approvals from DHCS, and one STRTP is awaiting final MH Program approval. Facilitated orientations with 5 STRTPs to assist in obtaining approval from DHCS. 	
Information Systems	<ul style="list-style-type: none"> Coordination of the high-volume shift from in-person to telehealth treatment. Implementing Cerner's HealthIntent platform, which will serve as data warehouse providing robust reporting and also interoperability. 	<ul style="list-style-type: none"> Include Optum in strategizing training requirements for staff on both the legacy EHR and Millennium. Data entry reliability across the system varies, impacting reliability of timeliness, completeness, and accuracy of reporting.
Structure and Operations	<ul style="list-style-type: none"> Well-organized administrative structure that promotes collaboration Partnership with UCSD effectively expands ability to use data and manage system. 	<ul style="list-style-type: none"> Claims submission delays in Nov & Dec that resulted in a significant number of claim transactions not being included in the analysis for CY 2019. These delays negatively impact county cash-flow.

Recommendations

	Domains	Recommendations*
1	PIP Status	The MHP is advised to use CalEQRO technical assistance (TA) for both PIPs throughout the design and implementation process.
2	Access to Care	The MHP should prioritize addressing the level of care pressure across the system that was identified by the MHP and contractor staff.
3	Timeliness of Services	Review and refine data reliability and calculations for timeliness measures, particularly for urgent appointments.
4	Quality of Care	Develop a focused, centralized quality improvement (QI) process related to medication monitoring in order to identify system-level issues that should be addressed.
5	Information Systems	Include Optum in strategizing the complex training requirements for staff that would keep them competent on both the legacy EHR and the new Millennium platform at the same time.
6	Structure and Operations	Investigate and address Community Based Organizations' (CBO) concerns regarding inconsistencies in contract monitoring and communication with contract officers.

*Recent updates and current status of recommendations available through this [linked tracker](#).



County of San Diego

COVID-19 Emergency Rental and Utilities Assistance Program

The County's 2021 Emergency Rental and Utilities Assistance Program (ERAP) helps eligible households in qualifying areas who have been financially impacted by the COVID-19 pandemic. The program provides payment assistance for renters who need help with rent and utilities. Applications will be accepted until funds are no longer available.

Click here to apply for the County's Emergency Rent and Utilities Assistance Program

Haga click aquí para aplicar al Programa Emergencia para Apoyo de Renta y Utilidades del Condado

Residents of the cities of San Diego and Chula Vista can click here to visit ERAPSanDiego.org for information about rental assistance in their area.

Los residentes de las ciudades de San Diego y Chula Vista pueden hacer clic aquí para visitar ERAPSanDiego.org para obtener información sobre la asistencia de alquiler en su área.

Application Selection - The County will prioritize application selection based on the following:

Primary Prioritizations:

- Household income at or below 50% Area Median Income (AMI)
- One or more household members are unemployed as of the date of the application for assistance and have not been employed for the 90-day period before such date (household income must not be above 80% AMI)

Secondary Prioritizations:

- Single-parent households
- Health Equity (using the lowest two quartiles of the Healthy Places Index or HPI to prioritize)-Residents who live in areas that have less access to healthy opportunities. Information about the Healthy Places Index can be found at healthyplaces.org. View County of San Diego map with HPI by [City](#) and [Zip Code](#).

Eligibility Criteria - To be eligible for the program, households must meet all of the following criteria:

Jurisdiction:

- HCDS will serve individuals and families residing in the unincorporated areas of San Diego and the cities of Carlsbad, Coronado, Del Mar, El Cajon, Encinitas, Escondido, Imperial Beach, La Mesa, Lemon Grove, National City, Oceanside, Poway, San Marcos, Santee, Solana Beach, and Vista

Eligible Income:

- Household income must fall at or below 80% AMI

Renter:

- Household must have an obligation to pay rent

Financial Hardship:

- Households must have qualified for unemployment benefits or experienced a financial hardship directly or indirectly related to COVID-19.
- Household is at risk of experiencing homelessness or housing instability.

Other Eligibility Notes:

- Households currently receiving rental subsidies such as Section 8, rapid rehousing assistance, or rental assistance from non-profit agencies may apply. The household must certify that the ERAP assistance requested does not duplicate any other assistance, including federal, state, or local assistance provided for the same costs. Duplication of assistance is subject to County verification.
- Only one application per residence will be permitted.

Emergency Rent and Utility Assistance:

- ERAP will provide payment assistance for renters behind on rent and utilities. Financial assistance for arrears can be from April 2020 to March 2021, up to twelve months.

Landlord Participation:

- If the landlord accepts participation in the program, the County will compensate 80% of an eligible household's rental arrears accumulated from April 2020 to March 2021. The landlord must agree to accept the 80% payment as payment in full of the rental debt owed by the tenant, which means the landlord forgives the remaining debt. The rental arrears will be paid directly to the landlord.
- The landlord does not have to participate in the program. If the landlord declines participation in the program, the County can compensate 25% of the eligible household's monthly rental arrears accumulated from April 2020 to March 2021. In this situation, payment of rental arrears can be paid directly to the tenant.

Income Levels:

- To be eligible, the combined income of all persons in the household must fall at or below 80% Area Median Income (AMI). Please see AMI chart below.

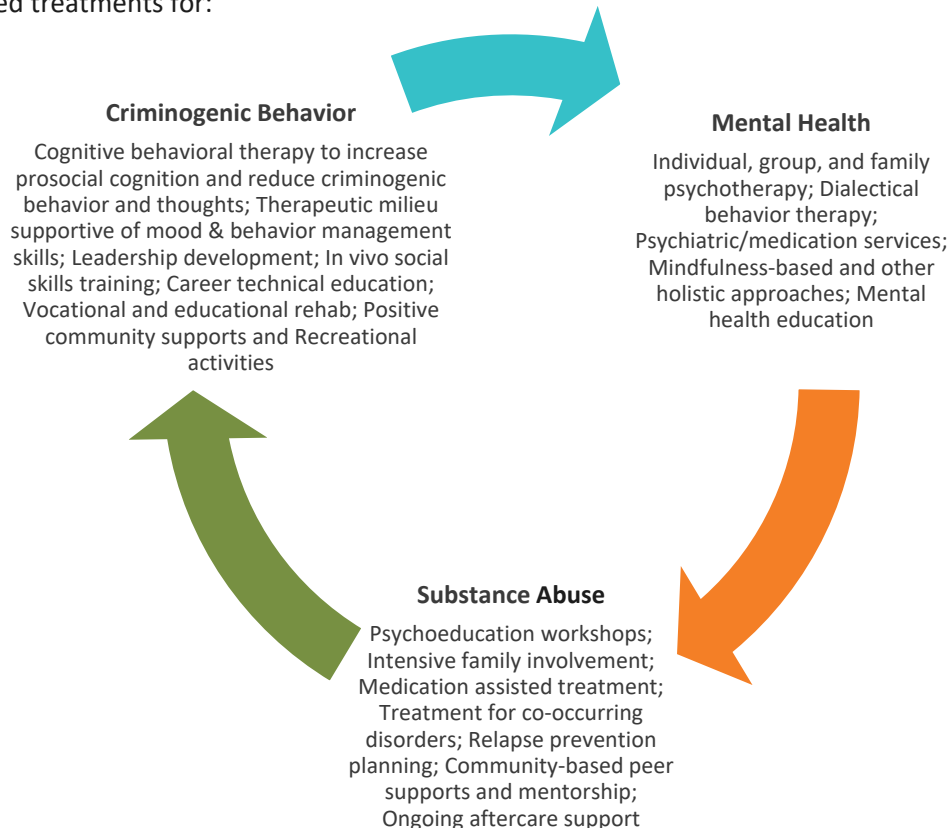
Number of People in Household	Income equal to or less than the following (80% AMI):
1	\$67,900
2	\$77,600
3	\$87,300
4	\$97,000
5	\$104,800
6	\$112,550
7	\$120,300
8	\$128,050

BEHAVIORAL HEALTH SERVICES & DEPARTMENT OF PROBATION PROGRAM ANNOUNCEMENT



HEALING OPPORTUNITIES FOR PERSONAL EMPOWERMENT (HOPE)

Behavioral Health Services (BHS) and the Department of Probation have collaborated on the design for a new intensive treatment program for in-custody youth to begin July 2021. The HOPE program, or “Healing Opportunities for Personal Empowerment”, supports the juvenile justice system’s transition to a positive youth development model while also focusing on the interrelated Triad of Treatment needs typical of youth who are in custody and provides evidence-based and evidence-informed treatments for:



This innovative program will allow BHS Juvenile Forensics Services STAT-HOPE clinicians to work side-by-side with Probation staff in the units to create a therapeutic milieu that is both strengths-based and trauma-informed. This will allow youth to practice newly acquired skills in a safe environment, while also maintaining structure and personal accountability.

Youth will be actively engaged in positive aspects of their home community to decrease recidivism and further improve long-term outcomes by helping youth to more quickly exit probation and thrive in the community. The HOPE program will actively work to foster engagement with the larger San Diego community. To accomplish this, family members, other positive allies of the youth, and community-based organizations will be an integral part of the in-custody treatment program.

As a youth progresses through their therapeutic program, they will be encouraged to make use of passes to leave the facility so they can engage in prosocial community activities involving family, education, vocational training, and recreational activities. This will allow the youth to have progressively increasing responsibilities, while slowly decreasing the supervision required.

Once the youth has successfully completed their treatment and in-custody time, the intent is they will continue to receive services from a contracted service provider as well as from the HOPE clinicians to ensure success once returning home.



"We Provide Healthy, Sustainable, and Enriching Environments for All"

Bay Terraces Community and Senior Center

7445 Tooma Street | San Diego, CA 92139 | (619)527-7632
| Vacant, Center Director I

Cesar Chavez Community Center

455 Sycamore Road | San Diego, CA 92173 | (619)424-0464
| Mari Jo Ricanor, Center Director III
| Yvette Zamudio, Assistant Center Director

Montgomery-Waller Recreation Center

3020 Coronado Avenue | San Diego, CA 92154 | (619)424-0466
| CJ Saldana, Center Director III
| Alissa Cordova, Assistant Center Director

Paradise Hills Recreation Center

6610 Potomac Street | San Diego, CA 92139 | (619)527-3419
| Mariah Cote, Center Director II
| Keyana Wilson, Assistant Center Director

Penn Athletic Field

2555 Dusk Drive | San Diego, CA 92139 | (619)527-3458
| Vacant, Center Director I

Robert Egger, Sr. - South Bay Recreation Center

1885 Coronado Avenue | San Diego, CA 92154 | (619)424-0470
| Viviana Zermeno, Center Director III
| Kevin Kirkpatrick, Assistant Center Director

San Ysidro Community Activity Center

179 Diza Road | San Diego, CA 92173 | (619)424-0472
| Robert Lara Jr., Center Director III
| Jenifer Vaupel, Assistant Center Director

Silver Wing Recreation Center

3737 Arey Drive | San Diego, CA 92154 | (619)424-0465
| Vacant, Center Director II
| Caitlin Weston, Assistant Center Director

Skyline Hills Recreation Center

8285 Skyline Drive | San Diego, CA 92114 | (619)527-3486
| Latricia Williams, Center Director II

Summer 2021 PROGRAM GUIDE

June 1 – August 31

**Montgomery-Waller | Robert Egger | Silver Wing
Cesar Chavez | San Ysidro
Paradise Hills | Penn | Skyline | Bay Terraces**

HOLIDAY CLOSURES

Memorial Day (May 31)
Independence Day (July 4 and 5)
Labor Day (September 6)

AREA MANAGERS

Johnny Chou: (619)525-8237
Silver Wing/Cesar Solis

Erek Estrada: (619)424-0459
San Ysidro/Cesar Chavez

Albert Hara: (619)424-0467
Montgomery Waller/South Bay

CaSandra Palmer-Thodile:
(619)527-3464
Bay Terrace/Paradise Hills/Penn/Skyline

DISTRICT MANAGER

Manuel Gonzalez: (619)525-8286

COVID-19 Updates and Guidelines

Updates for park safety and playground
safety protocols are available at
www.sandiego.gov/park-and-recreation
* Masks are required to enter facilities

Virtual Recreation Center

Virtual programs and activities are
available at our Virtual Recreation
Center www.sandiego.gov/prvc

Skate Parks (10AM to Dusk)

Charles Lewis: 6610 Potomac Street
Cesar Solis: 4895 Del Sol Blvd

Summer 2021 Programs

LOCATION	SPECIAL EVENTS	DATES	DAY	TIME	AGES	FEE
Cesar Chavez	Teen Nite	July 9–August 27	Friday	5:30–8:30PM	12–17	Free
M. Waller	Teen Nite	July 9–August 27	Friday	5:30–8:30PM	12–17	Free
P. Hills	Teen Nite	July 9–August 27	Friday	5:30–8:30PM	12–17	Free
San Ysidro	Teen Nite	July 9–August 27	Friday	5:30–8:30PM	12–17	Free
Skyline Hills	Teen Nite	July 9–August 27	Friday	5:30–8:30PM	12–17	Free
South Bay	Teen Nite	July 9–August 27	Friday	5:30–8:30PM	12–17	Free
LOCATION	MOVIES IN THE PARK	DATES	DAY	TIME	AGES	FEE
Bay Terrace	Moana (Disney)	June 25	Friday	Starting at dusk	All Ages	Free
South Bay	Tarzan (Disney 1999)	July 9	Friday	Starting at dusk	All Ages	Free
Skyline Hills	Bolt (Disney)	July 23	Friday	Starting at dusk	All Ages	Free
Silver Wing	Moana (Disney)	July 30	Friday	Starting at dusk	All Ages	Free
South Bay	Raya & The Last Dragon (Disney 2021)	August 6	Friday	Starting at dusk	All Ages	Free
Cesar Chavez	Star Wars: The Rise of Skywalker	August 13	Friday	Starting at dusk	All Ages	Free
M. Waller	Toy Story 4 (Disney)	August 13	Friday	Starting at dusk	All Ages	Free
LOCATION	FREE MEALS	DATES	DAY	TIME	AGES	FEE
Cesar Chavez	Breakfast/lunch To-Go	June 1–August 31	Mon–Fri	12:00–1:00PM	18&U	Free
M. Waller	Breakfast/lunch To-Go	June 1–August 31	Mon–Fri	12:00–1:00PM	18&U	Free
P. Hills	Breakfast/lunch To-Go	June 1–August 31	Mon–Fri	12:00–1:00PM	18&U	Free
San Ysidro	Breakfast/lunch To-Go	June 1–August 31	Mon–Fri	12:00–1:00PM	18&U	Free
Silver Wing	Breakfast/lunch To-Go	June 1–August 31	Mon–Fri	12:00–1:00PM	18&U	Free
Skyline Hills	Breakfast/lunch To-Go	June 1–August 31	Mon–Fri	12:00–1:00PM	18&U	Free
South Bay	Breakfast/lunch To-Go	June 1–August 31	Mon–Fri	12:00–1:00PM	18&U	Free

The City of San Diego, County of San Diego, San Diego Parks Foundation, and Price Charities have partnered to introduce the Come Play Outside Program. The program will feature free movies in the park, teen nites, Fern Street Circus performances, discounted camps and classes, and scholarships. For more information about programs and initiatives supported by the San Diego Parks Foundation, visit www.sandiegoparksfoundation.org.



**SAN DIEGO
PARKS
FOUNDATION**



REGISTRATION

Visit us on the web at www.sandiego.gov/park-and-recreation. Register on-line at www.SDRecConnect.com.

NO MAKE-UP CLASSES/ REFUND POLICY

Classes are not offered on holidays. Refunds are issued if the class is cancelled by the City, or partial refund of 97% if refund request is submitted more than 3 days prior to first meeting, and 75% if submitted less than 3 days prior to first meeting.

Scholarships available compliments of the Come Play Outside program (No camps on July 5)

* Scholarships are available based on financial need. Please call the recreation center for more information. *

** Siblings pay \$10 if eligible for scholarship based on financial need. Please call recreation center for more information. **

Summer 2021 Programs

LOCATION	SUMMER CAMPS	DATES/ACTIVITY #	DAY	TIME	AGES	FEE
Cesar Chavez	Summer Camp**	Week 1: 93130 (6/7-6/11) Week 2: 91164 (6/14-6/18) Week 4: 91165 (6/28-7/2) Week 5: 91166 (7/6-7/9) Week 6: 91167 (7/12-7/16) Week 7: 91168 (7/19-7/23)	Mon-Fri	10:30AM-3:30PM	6-12	\$37/ Week
Cesar Chavez	Young Engineers Camp**	June 14-June 18: 92120 July 12-July 16: 92121	Mon-Fri	12:30-3:30PM	5-12	\$30/ Week
Cesar Chavez	Nature Camp*	June 21-June 25: 88586	Mon-Fri	9:00AM-5:00PM	6-12	\$50
M. Waller	Mad Science Camp**	Week 1: 91843 (6/21-6/25) Week 2: 91894 (8/23-8/27)	Mon-Fri	4:00-6:00PM	5-12	\$25/ Week
M. Waller	Young Engineers Camp**	Week 1: 91879 (6/28-7/2) Week 2: 91880 (7/26-7/30)	Mon-Fri	3:00-6:00PM	5-12	\$30/ Week
Paradise Hills	Summer Camp**	Week 1: 90362 (6/21-6/25) Week 2: 90363 (6/28-7/2) Week 3: 90364 (7/6-7/9) Week 4: 90365 (7/12-7/16) Week 6: 90367 (7/26-7/30) Week 7: 90368 (8/2-8/6) Week 8: 90376 (8/9-8/13) Week 9: 90369 (8/16-8/20) Week 10: 90382 (8/23-8/27)	Mon-Fri	10:00-4:00PM	6-12	\$45/ week
P. Hills	Nature Camp*	July 19-July 23: 88587	Mon-Fri	9:00AM-5:00PM	6-12	\$50
P. Hills	Mad Science Camp**	June 28-July 2: 91314	Mon-Fri	1:00-4:00PM	5-11	\$30
Paradise Hills	Elementary Institute of Science Camp**	June 26-August 28: 91313	Saturday	10:00-12:00PM	8-12	\$36
San Ysidro	Nature Camp*	June 14-June 18: 88592	Mon-Fri	9:00AM-5:00PM	6-12	\$50
San Ysidro	Summer Camp**	Week 1: 91657 (6/21-6/24) Week 2: 91660 (6/28-7/1) Week 3: 91662 (7/6-7/8) Week 4: 91664 (7/12-7/15) Week 5: 91665 (7/19-7/22)	Mon-Thurs	10:00AM-4:00PM	6-12	\$36/ Week
Silver Wing	Fleet Science Camp**	Week 1: 91955 (6/14-6/18) Week 2: 91956 (6/21-6/25)	Mon-Fri	9:00AM-3:00PM	8-12	\$45
Silver Wing	Play-Well TEKologies Camp**	Week 1: 91949 (7/12-7/16) Week 2: 91953 (7/19-7/23) Week 3: 91954 (7/26-7/30)	Mon-Fri	9:00AM-3:00PM	6-10	\$45/ Week
Silver Wing	Nature Camp*	July 6-July 9: 88595	Tues-Fri	9:00AM-5:00PM	6-12	\$40
Skyline Hills	Summer Camp**	Week 1: 90662 (6/21-6/25) Week 2: 90667 (6/28-7/2) Week 3: 90668 (7/6-7/9) Week 4: 90738 (7/19-7/23) Week 5: 90739 (7/26-7/30) Week 6: 907340 (8/2-8/6) Week 8: 90741 (8/16-8/20)	Mon-Fri	8:00AM-4:00PM	6-12	\$60
Skyline Hills	Nature Camp**	Aug 9-Aug 13: 88588	Mon-Fri	8:00AM-4:00PM	6-12	\$50
South Bay	Summer Camp**	Week 1: 90743 (7/6-7/9) Week 2: 90747 (7/12-7/16) Week 3: 90748 (7/19-7/23)	Mon-Fri	9:00AM-4:30PM	6-12	\$60/ Week
South Bay	Nature Camp*	June 28-July 2: 88585	Mon-Fri	9:00AM-5:00PM	6-12	\$50

Scholarships available compliments of the Come Play Outside program (No classes on July 5)

* Scholarships are available based on financial need. Please call the recreation center for more information. *

** Siblings pay \$10 if eligible for scholarship based on financial need. Please call recreation center for more information. **

Summer 2021 Programs

LOCATION	SPORTS	DATES/ACTIVITY #	DAY	TIME	AGES	FEE
Cesar Chavez	Prep Sports and Play*	June: 91216 July: 92119	Tue/Thur	1:00-3:00PM	8-12	\$20/ Month
M. Waller	Basketball League*	June 14-August 18: 93575	Wednesday games 7/14-8/18 Practices TBD 6/14-7/13		8-10	\$25
M. Waller	Basketball League*	June 14-August 18: 93577			10-12	\$25
M. Waller	Sport Camp*	Week 1: 91845 (6/7-6/11) Week 2: 92416 (6/14-6/18) Week 3: 92417 (6/21-6/25) Week 4: 92418 (6/28-7/2)	Mon-Fri	4:00-6:00PM	8-14	\$20/ Week
Paradise Hills	Basketball Skills	June: 90372 July: 90371 August: 90370	Tue/Thur	6:00-7:00PM	8-14	\$10/ Month
Paradise Hills	Little Dunkers	June: 90375 July: 90374 August: 90373	Tue/Thur	5:00-6:00PM	4-7	\$10/ Month
Penn	Football Clinic	June: 90563 July: 90565 August: 90566	Tue/Thur	4:30-6:00PM	8-10	\$10/ Month
Penn	Football Clinic	June: 90602 July: 90615 August: 90616	Mon/ Wed	5:00-6:00PM	10-16	\$10/ Month
Penn	Soccer Clinic	June: 90598 July: 90599 August: 90600	Mon/ Wed	5:00-6:00PM	4-8	\$10/ Month
San Ysidro	Basketball League*	June 14-August 18: 93558	Wednesday games 7/14-8/18 Practices TBD 6/14-7/13		8-10	\$12
San Ysidro	Basketball League*	June 14-August 18: 93559			10-12	\$12
Silver Wing	Sports Clinic*	July 17-Sept 18: 91948	Saturday	10:00-11:00AM	5-7	\$15
Skyline Hills	Basketball League*	June 14-August 18: 93564	Wednesday games 7/14-8/18 Practices TBD 6/14-7/13		10-12	\$25
South Bay	Basketball League*	June 14-August 18: 93578	Wednesday games 7/14-8/18 Practices TBD 6/14-7/13		8-10	\$25
South Bay	Basketball League*	June 14-August 18: 93579			10-12	\$25
LOCATION	FITNESS	DATES/ACTIVITY #	DAY	TIME	AGES	FEE
M. Waller	Walk to Wellness	June 1-August 31: 91864	Tue/Thur	4:00-6:00PM	55+	Free
San Ysidro	Gentle Yoga (Virtual)	June: 91690 July: 91691 August: 91692	Thursday	7:00-8:00PM	16+	Free
Silver Wing	Cheer Fitness*	July 13-September 14: 91931	Tuesday	5:00-6:00PM	7-10	\$15
LOCATION	ADULT	DATES/ACTIVITY #	DAY	TIME	AGES	FEE
San Ysidro	Lotería (Virtual)	June 3-August 26: 89941	Thursday	2:30-3:30PM	50+	Free
Paradise Hills	Adult Ceramics	June: 90638 July: 90637 August: 90636	Wed	11:00AM-2:00PM	55+	\$8/ Month
Paradise Hills	Soul Line Dance	June: 90378 July: 90379 Aug: 90380	Tue/Thur	6:30-8:00PM	18+	\$10/ Month

Scholarships available compliments of the Come Play Outside program (No classes on July 5)

* Scholarships are available based on financial need. Please call the recreation center for more information. *

** Siblings pay \$10 if eligible for scholarship based on financial need. Please call recreation center for more information. **

Summer 2021 Programs

LOCATION	DANCE	DATES/ACTIVITY #	DAY	TIME	AGES	FEE
Bay Terrace	Dance Expression (Kindergarten)**	June 22–August 24: 91720	Tuesday	3:00–4:00PM	4–5	\$40
Bay Terrace	Dance Expression (Preschool)**	June 22–August 24: 91719	Tuesday	4:00–5:00PM	3–4	\$40
Bay Terrace	Dance Expression (Elementary)**	June 22–August 24: 91721	Tuesday	5:00–6:00PM	6–10	\$40
P. Hills	Pre Tap	June 28–Sept 13: 93109	Monday	4:00–4:45PM	4–6	\$41
P. Hills	Beginner Tap (1A)	June 28–Sept 13: 93110	Monday	4:45–5:30PM	6–17	\$41
P. Hills	Beg. Jazz (1A)	June 28–Sept 13: 93111	Monday	5:30–6:15PM	6–17	\$41
San Ysidro	Creative Movements	June: 91711 July: 91712 August: 91713	Wed	4:00–5:30PM	5–8	\$12/ Month

LOCATION	ENRICHMENT	DATES/ACTIVITY #	DAY	TIME	AGES	FEE
P. Hills	Rock and Tumble*	July: 91736 August: 91735	Friday	9:30–10:30AM	0–2	\$25/ Month
P. Hills	Rock and Tumble*	July: 91740 August: 91738	Friday	10:30–11:30AM	3–5	\$25/ Month
P. Hills	Rock and Tumble*	July: 91732 August: 91743	Friday	11:30–12:30PM	6–11	\$25/ Month
South Bay	Guitar	July: 92042 August: 92044	Wed	6:30–7:30PM	8–15	\$20/ Month
M. Waller	Guitar*	July 7–August 25: 91844	Wed	4:30–5:30PM	10+	\$25

LOCATION	FIELD TRIPS	DATES/ACTIVITY #	DAY	TIME	AGES	FEE
South Bay	Field Trip Friday	June 11: 90742 June 18: 90744 June 25: 90745 July 2: 90746	Friday	8:30AM–6:00PM	13–17	\$20/ Week

LOCATION	SPECIAL INTEREST	DATES/ACTIVITY #	DAY	TIME	AGES	FEE
Cesar Chavez	Game Day Fridays (Virtual)	June: 91213 July: 91214 August: 91215	Friday	3:30–5:00PM	10–16	Free
Cesar Chavez	Tik Tok With Mister T	June 1–August 31: 91163	Tuesday	3:30–5:00PM	10–14	Free

Scholarships available compliments of the Come Play Outside program (No classes on July 5)

* Scholarships are available based on financial need. Please call the recreation center for more information. *

** Siblings pay \$10 if eligible for scholarship based on financial need. Please call recreation center for more information. **

REGISTRATION

Registration for all classes is on a first come, first served basis. We accept all major credit cards. You must register at the Recreation Center where your class is scheduled or on-line at www.SDRecConnect.com. Registration fees must be paid by the first class of the session/month.

To find your class use the Activity # listed in this program.

Summer Season: fees for 3 month classes are valid from June 1 to August 31. There is no prorating. Registration starts May 15 at 10:00 am.



Summer 2021 Programs

SUMMER CAMPS

The Come Play Outside program is providing contracted camps with significant discounts. The City of San Diego is committed to making camp accessible for all its residents so scholarships are also available based on financial need.

Young Engineers Camp: 73% discount included

www.sandiegocenter.e2youngengineers.org

Cesar Chavez: 6/14-6/18 & 7/12-7/16 (\$30 weekly)

Montgomery Waller: 6/28-7/2 & 7/26-7/30 (\$30 weekly)

Mad Science Camp: 74% discount included

www.sandiego.madscience.org

Montgomery Waller: 6/21-6/25 & 8/23-8/27 (\$25 weekly)

Paradise Hills: 6/28 to 7/2 (\$30 weekly)

Fleet Science Camp: 89% discount included

www.fleetscience.org/tags/summer-camps

Silver Wing: 6/14-6/25 (\$45 weekly)

Play-Well Teknologies Camp: 60% discount included

www.play-well.org

Silver Wing: 7/12-7/30 (\$45 weekly)

Elementary Institute of Science: 83% discount included

www.eisca.org

Paradise Hills: 6/26-8/28 (\$36 for Saturdays)

Parks and Recreation Department Staff-led Day Camps

Cesar Chavez: 6/7-7/23 (\$37 weekly)

Montgomery Waller: (Sports): 6/7-7/2 (\$20 weekly)

Paradise Hills: 6/21-8/27 (\$45 weekly)

San Ysidro: 6/21-7/22 (\$36 weekly)

South Bay: 7/6-7/23 (\$60 weekly)

SPECIALIZED CLASSES

The Come Play Outside program is providing contracted specialized classes with significant discounts. Scholarships are available based on financial need.

Rock and Tumble Gymnastics: 63% discount included

www.rockntumble.com

Paradise Hills: 7/9-8/27 (\$25 monthly)

Dance Expression: 62% discount included

www.jenniembryant.wixsite.com/expressionsdf

Bay Terraces: 6/22-8/24 (\$40)

OUTDOOR BASKETBALL LEAGUE

This fun development league emphasizes fundamental skills such as passing, dribbling and shooting in a friendly and team oriented environment. Wednesday games will be hosted at Montgomery Waller starting on July 14.

Montgomery Waller | San Ysidro | Skyline | South Bay

Season Dates: June 14-August 18

Days: Wednesday Games (Practices TBD)

Ages: 8-10 years and 11-12 years

Fee: \$25 per season



FRIDAY TEEN NITES

Teens are invited for a FREE Friday evening of fun activities and dinner. Activities include game trucks, rock walls, arts and crafts and more. Free dinner includes carne asada tacos, fries, hamburgers, hotdogs, pizza and Subway. The program includes free field trips to Jump Around, Padre Game and other destinations.

Cesar Chavez | Montgomery Waller | Paradise Hills

San Ysidro | Skyline Hills | South Bay

Dates: July 9-August 27

Days/Times: Fridays (5:30-8:00PM)

Ages: 12-17 years

GRAB-AND-GO FREE MEALS

Nutritious breakfast and lunch are available FREE to all children 18 years and under. This program is offered in partnership with the San Diego Unified School District and Feeding San Diego. Meals are available to go (children do not need to be present) and no paperwork is required.

Cesar Chavez | Montgomery Waller | Paradise Hills

San Ysidro | Silver Wing | Skyline Hills | South Bay

Session Date: June 1-August 31

Days: Monday-Friday (No Lunch/breakfast on July 5)

Meal Pick-up Time: 12:00-1:00pm



Behavioral Health Services (BHS) – Contractor Information Notice

To:	BHS Contracted Providers
From:	Sent on behalf of Dr. Luke Bergmann, Director, Behavioral Health Services
Date:	May 28, 2021
Title	Announcing the 2021 BHS NACo Award Winners

In January, BHS nominated three programs for the National Association of Counties (NACo) Achievement Awards Program. This award recognizes programs for innovative approaches to providing new or needed services, improving administration of existing programs, or promoting intergovernmental cooperation and coordination. **We are pleased to announce all three BHS programs received NACo awards!**

- **Pathways to Well-Being Virtual Workforce Development Training Series (Pathways) Microlearnings** – Pathways is an innovative and cost-effective online training series developed to accommodate the evolving way in which information is shared with behavioral health providers and aims to ensure that services are delivered in a trauma-informed, client-centered manner and are documented to adhere to Medi-Cal standards. Pathways utilizes microlearnings, structured to be 8-10 minutes long for ease of completion and retention of information. For more information, please contact Amanda Lance-Sexton at Amanda.Lance-Sexton@sdcounty.ca.gov.
- **The Roaming Outpatient Access Mobile (ROAM)** – ROAM health clinics provide behavioral health services to rural Native American communities in the North Inland and East regions of the County of San Diego. Services provided include: individual/group counseling; medication management; case management; peer/family support; care coordination; prevention and early intervention services; substance use screening; referrals; and linkages to ongoing care. The goal is to improve access to and utilization of behavioral health services in these communities by addressing geographic and cultural barriers through the use of mobile clinics and cultural brokers to provide comprehensive and culturally competent behavioral health services. For more information, please contact Charity White-Voth at Charity.White-Voth@sdcounty.ca.gov.
- **SchoolLink** – Since the 1990s, BHS has partnered with school districts throughout San Diego County to offer outpatient specialty mental health and substance use disorder (SUD) treatment on school campuses that serve students on Medi-Cal and those who are low-income, uninsured, or underinsured. SchoolLink implements a standardized practice across our system of care, increases collaboration between schools and providers of mental health and SUD treatment programs, and provides system-level data that was previously unavailable. BHS can now ensure resources are optimally deployed by tracking and reviewing data on service utilization throughout the school system. For more information, please contact Fran Cooper at Frances.Cooper@sdcounty.ca.gov.

For More Information on NACo Achievement Awards Process:

- Contact your Contracting Officer's Representative (COR) or
- Philip Ainsworth, BHS Administrative Analyst, Philip.Ainsworth@sdcounty.ca.gov, (619) 563-2738

Children's Mental Health Awareness Day Proclamation

May 7, 2021



***WHEREAS**, the County of San Diego has adopted Live Well San Diego, a long-term, innovative vision to ensure residents are healthy safe and thriving by cultivating opportunities for all people and communities to grow, connect and enjoy the highest quality of life; and*

***WHEREAS**, May was first declared as National Mental Health Awareness Month in 1949, and in 2006, May 7th became Children's Mental Health Awareness Day to acknowledge the importance of children's mental health; and*

***WHEREAS**, positive mental health is essential to a child's healthy development starting at birth and requires positive youth development, resiliency, and recovery; and*

***WHEREAS**, all children and youth have the right to happy and healthy lives and deserve access to effective care to prevent or treat any mental health problems which may develop; and*

***WHEREAS**, the National Alliance on Mental Illness (NAMI) San Diego and the County of San Diego have partnered to host the 7th Annual Youth Mental Health Well-Being Celebration in support of Children's Mental Health Awareness Day to raise awareness and bring community resources to the estimated one in five children in San Diego County with a diagnosable mental health condition; and*

***WHEREAS**, this annual celebration provides opportunities for the community to acknowledge the importance of children's mental health well-being through different ways of art expression and provides an opportunity for collaboration and outreach to the families of San Diego County; and*

***WHEREAS**, the County of San Diego is committed to recognizing and honoring events, such as the Youth Mental Health Well-Being Celebration, that contribute towards achieving the Live Well San Diego vision; **NOW THEREFORE**,*

***BE IT PROCLAIMED** by Chair Nathan Fletcher and all members of the San Diego County Board of Supervisors on this 7th day of May 2021 that they commend Youth Mental Health Well-Being Celebration in San Diego County and do hereby declare this day to be "**Children's Mental Health Awareness Day**" throughout San Diego County.*



FACT SHEET: THE AMERICAN RESCUE PLAN ACT OF 2021 (H.R. 1319)

The American Rescue Plan (H.R. 1319) is a \$1.9 trillion emergency legislative package to provide the resources needed to address the ongoing COVID-19 public health crisis and spur a strong economic recovery.

The American Rescue Plan Act will:

- Increase direct assistance to households in need across America by \$1,400 per person, bringing the total (including the \$600 down payment enacted in December) to \$2,000 for eligible recipients.
- Extend and expand unemployment insurance and give families with children as well as childless workers a boost through enhanced tax credits, including:
 - Extends the Pandemic Unemployment Assistance program which extends benefits to some self-employed and some other pandemic-affected individuals who don't qualify for regular state unemployment benefits through August 29, 2021;
 - Extends and expands the Federal Pandemic Unemployment Compensation – boosts the federal supplement to state UI benefits from \$300 to \$400 for the weeks ending after March 14 and before August 29, 2021;
 - Makes the child tax credit fully refundable, and advanceable, for 2021 and increases the amount to \$3,000 per child (\$3,600 per child under age 6); and
 - Helps families access high-quality childcare by expanding the Child and Dependent Tax Credit (CDCTC) to allow many families to claim up to half of their childcare expenses.
- Extend enhanced SNAP benefits, providing funds to alleviate backlogs and respond to pandemic impacts in our food supply chains.

- Provide direct housing and nutrition assistance to families and expand access to safe and reliable childcare and affordable health care.
- Provide nearly \$130 billion to help K-12 schools safely reopen and address lost time in the classroom, including an estimated \$5 billion for schools in Pennsylvania.
- Dedicate nearly \$40 billion for institutions of higher education and requires institutions to dedicate at least half of their funding for emergency financial aid grants to students.
- Provide resources to increase COVID-19 vaccinations across the country to test, treat and protect all Americans. The plan will mount a national vaccination program that includes setting up community vaccination sites nationwide. It will also take complementary measures to combat the virus, including scaling up testing and tracing, addressing shortages of personal protective equipment (PPE) and other critical supplies, investing in high-quality treatments, and addressing health care disparities.
- Provide support for small businesses including:
 - \$15 billion for COVID-19 Emergency Grants Through the Economic Injury Disaster Loan (EIDL) Program;
 - \$7.25 billion in additional funding for the Paycheck Protection Program (PPP) and expands eligibility of 501(c) nonprofits of all sizes and types; and
 - \$25 billion for a new program at the Small Business Administration (SBA) to aid restaurants and bars with 20 or fewer locations, with \$5 billion set aside specifically for smaller establishments with less than \$500,000 in 2019 annual revenue.
- Provide crucial resources to protect the jobs and health of first responders, frontline public health workers, teachers, transit workers, and other essential workers that all Americans depend on, including:
 - \$20 billion for vaccine administration and distribution;
 - \$46 billion for testing, contact tracing, and mitigation and purchasing personal protective equipment; and
 - \$7.6 billion to hire 100,000 full time employees into the public health workforce.
- Procure essential medical supplies and equipment through the Defense Production Act.
- Provide key funding for transit agencies, airports, and the Federal Emergency Management Agency (FEMA) including:
 - \$30 billion for transit to help transit agencies keep jobs for drivers, mechanics and other employees;

- Purchase of PPE, shields, sanitizer, wipes for their workers, and to maintain the transit routes relied upon by Americans;
 - \$8 billion in emergency aid for airports – including approximately \$35 million for Pittsburgh International Airport; and
 - \$50 billion for the FEMA Disaster Relief Fund.
- Provide funds to help the VA meet the health and economic needs of our nation's veterans, including funds to waive copays for treatment and to help the VA reduce claims and appeals backlogs caused by COVID.
- Include direct payments, extended pandemic-related unemployment benefits, financial assistance for individuals to retain health coverage through the Affordable Care Act, and funding for enhancements to refundable tax credits – like the Child Tax Credit and the Earned Income Tax Credit – designed to help low-income Americans and combat child poverty.

Children, Youth and Families System of Care Council

March 8, 2021

Advancing Cultural Responsiveness and Equity: this occurs at the program, policy and practice levels but nothing happens without personal commitment. Here are some examples how participants in the Children Youth and Families System of Care Council are showing their personal/professional commitment.

Examples from Council Members:

- ✓ Serve as an ambassador and advocate to ensure inclusion of individuals with lived experience and how they are powerful in making a difference in the system of care.
- ✓ Advocate for more integration of hiring/including individuals with lived experience. As someone with lived experience, use my voice more to bring new insights.
- ✓ Do more listening, reading and learning to help contribute and lead from a more informed and relevant perspective.
- ✓ Increase awareness of the impact language has on relationships and interactions.
- ✓ Expand my knowledge and awareness by continuing to learn about different cultures.
- ✓ Participate on committees that advance social and racial equity such as the Birth of Brilliance conference.
- ✓ Engage in difficult conversations with other leaders and take the risk of showing vulnerability as a leader to learn and grow.
- ✓ Devote time to learn, listen, and deepen my understanding of race, equity, and inclusion. Committed to raising these issues so that are incorporated in policy, practice, and program system change.
- ✓ Acknowledge that education contributes to disparity.
- ✓ Shift cultural competence training focus from information to action oriented and trauma informed.
- ✓ Integrate cultural responsive considerations when applying standardized interventions and techniques.
- ✓ Facilitate integration of racial, equity, and inclusion between programs and systems.
- ✓ Design structures that support multiple interventions for equitable and targeted support.
- ✓ Create a diverse group of Youth Ambassadors from various cultures & lived experiences into a positive Mental Health Youth team that speaks to other youth in our social media platforms.

American Rescue Plan Act of 2021 (ARPA)

One Time Investment to Support Children, Youth and Families

CYF Council Priorities/Recommendations Discussion



The following incorporates CYF Council members' and stakeholders submitted input as well as from the June 14, 2021 Council meeting discussion.

General Guidelines for funding usage:

- Federal American Rescue Plan Act (ARPA) funds
 - New project Funding, cannot be used to sustain or improve current funded programs
 - Can be used of a limited number of years- To be used over several years
 - Can be used for both Behavioral health primary care and/or preventative care
- For more information regarding the June 8, 2021 Board of Supervisor's Board Letter on ARPA:
 - Link to the Clerk of the Board of Supervisors Meeting documents for June 8, 2021: <https://www.sandiegocounty.gov/content/sdc/cob/bosa/bos-calendar-meetings.html?date=06/08/2021&meetingtype=BOARD%20OF%20SUPERVISORS>
 - Link to the June 8, 2021-Item 03: Approve the Recommended Framework for the Use of American Rescue Plan Act Funding (ARPA), Establish Appropriations to Support Proposed Actions, And Authorize the Auditor & Controller to Establish a Trust Fund for the ARPA: <https://bosagenda.sandiegocounty.gov/cob/cosd/cob/doc?id=0901127e80d1b410>

Topics	Priorities/Recommendations for ARPA One-Time Investments – No Supplantation. This federal funding is to support – must be used in addition to, not in place of state and local funds.
Prevention& Early Intervention	<p>"Young children with developmental or family problems are not always identified for intervention early enough to seek intervention leaving them unprepared for school causing learning and behavioral challenges that lead to fertile ground for school to prison pipeline. This disproportionately affects children of color and children may be particularly at risk as we move out of COVID due to less eyes on the youth during lockdown. Early identification and connection to services is key and embedded mental health services and case management may help connect youth to PEI services.</p> <ul style="list-style-type: none"> • Pilot – pediatricians offices having embedded clinicians for immediate screening and referrals – prevention services – costs associated with initial set up may be sustainable through insurance billing • Consider contracts with pediatric clinics and private practitioners for referrals • Developing a decent referral system to get availability for providers including non-medi-cal providers <p><i>(Aisha Pope)</i></p> <p><u>"Expand preventative and early intervention services that strengthen children youth and families and help them thrive</u> The pandemic has shone a spotlight on many of the unmet needs and challenges faces children, youth and families. HHSA can promote healthy childhood environments by using ARPA for expansion of home visiting programs for families with young children, and enhanced services for child welfare-involved families and foster youth. These services are designed to be provided within the home and can therefore be intentionally paired with existing housing resource such as Family Unification Program (FUP) housing vouchers for families and youth with child welfare connections, as well as with new ARPA housing resources that can intentionally prioritize inclusion of HHSA families through programs such as Emergency Housing Vouchers, HOME ARP, Emergency Rental</p>

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	<p>Assistance, etc. This is especially important for children, youth and families facing more complex challenges and histories and those facing higher levels of risk and a myriad of vulnerabilities in order to strengthen these families and youth and help them to thrive. (Andrew Johnson)</p> <p>“Plant the Seeds/Grow the Garden Program: A Community-Inspired Healing & Wellness Model to cultivate and grow <i>whole-person wellness</i> across the lifespan.</p> <p>There are many individuals, families and community members who, for various reasons, may never seek out or engage in clinic-based services, regardless of accessibility. Creating more clinically-focused programs may not adequately address or accurately recognize the problem or meet the need.</p> <p>The intention of this Prevention & Early Intervention proposal would be to cultivate and integrate community-imbedded accessibility to therapeutic/healing opportunities without the requirement of a mental health diagnosis,* recognizing that either <i>waiting for</i>, or <i>until</i> one is present is already a delayed response. Rather than looking to treat Medical Necessity, let’s consider striving to meet, Human Necessity.</p> <p>Gleaning what we know about early brain development, attachment security/insecurity, the lifelong effects of early (and chronic) exposure to adverse events and toxic stress with less-than-optimal protective factors, and/or lack of opportunity to invite or evoke these protective factors exists long before anyone is seen in a clinic, office or community-based setting. Wonderful pathways for healing and resiliency building exists outside of the clinical setting and nurturing this <i>within</i> communities, through community members themselves seems important to address many of the issues regarding engagement, as well as removing the stigma and/or fear of accessing mental health services. When communities are supported to become places that nurtures its members, the seeds are planted and the garden can grow.</p> <p>Recognizing the intersection between chronic health conditions within communities and the need for whole-person, culturally informed community wellness across the lifespan seems imperative. Doing so through a lens that will be <i>most meaningful to the individuals and community</i> members as a whole, implementing the principles of what supports optimal early development, attachment security, hope, cultural humility and trauma-informed/responsive care is all part of planting the seeds so that the garden may grow.</p> <p>The proposal consideration is that the funding would invest in a Community-Inspired Healing & Wellness Model to provide training opportunities within and for communities where interested individuals come together, receive training and advocacy skills to represent the voices and support the wellness and healing of their community. Funds would support interested community members (possibly referred to as Gardeners) and ongoing technical assistance/support staff/training—These trainings could take place in familiar locations already familiar within the community (schools, parks, libraries, Boys and Girls Clubs, religious/spiritual and/or multicultural centers, local restaurants)—Imagine it to be where community members feel most</p>
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CYF Council Priorities/Recommendations Discussion



comfortable/naturally congregate to gather for training, and where businesses may donate use of the space to support these trainings (perhaps designating these organizations/places of business as Wellness Cultivators).

Planting the seeds for communities to co-create healthy spaces and informed places for multi-generational needs, inviting community-based opportunities and other partnerships that provide, nurture and sustain positive experiences and respond to adversity and toxic stress in ways that promote healing, safety, recovery, connectedness, and expansion, in a way that will be *most meaningful to the individuals and community* as a whole, holding the principles of early development, hope, cultural humility and trauma-informed/responsive care in mind.

Creating environments, activities, and opportunities** for engagement that are naturally therapeutic, tending to the importance of early, healthy brain building, are sensory rich for ages and stages across the lifespan, relationally and culturally supportive, and allow for and encourage embodied experiences to promote growth, possibility and new learning going forward in a way that will be *most meaningful to the individuals and community* as a whole, holding the principles of early development, hope, cultural humility and trauma-informed/responsive care in mind.

Outcomes would assess the strengthening of protective factors and reduction of risk factors within a community, over time, by measuring the health and wellness of its residents across different life stages. Since this model is intended to nurture and support embodied health and wellness, identifying the specific areas in which an individual community is experiencing dis-ease** seems critical to assess first in order to know what needs to be cultivated and/or healed.

**Access to behavioral health/diagnostic services when indicated, whether brought to communities or enhancing accessibility within the community at large is always an available option, yet this is considering and addressing something that is more of an interweaving of healing and wellness in an everyday, integrative, lived experience way, that is intended to be preventive over time.*

***Ideas can be provided."*

"While there are Early Childhood Based Services throughout San Diego County, it is a challenge to meet the needs of all families with young children, especially those with complex histories, in their homes. There has been an increase in ACEs screening through medical care which is increasing the amount of referrals for services, especially for clinical trauma services. With the increased referrals, the waitlists for services can sometimes be longer than 10 months. In addition, caregivers have expressed the difficulty of accessing services due to not meeting eligibility criteria or not having the financial resources. This funding would support families with children in early childhood who live in San Diego County, with Child First, formerly known as Child and Family Interagency Resource, Support, and Training (Child FIRST), a home-based intervention that aims to promote healthy child and family development through a combination of psychotherapy, care coordination, and consultation. Child First is provided by a clinical team that includes a mental health clinician and a care coordinator. The clinical team works jointly together to deliver the intervention. Child First is typically delivered over the course of 6 to 12 months. During the "assessment period" (first month), sessions occur twice weekly with both the mental health clinician and care coordinator. These sessions last about 90 minutes. After the assessment

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period, sessions occur at least once a week with each staff member. Sessions may occur with staff members together or separately depending on the unique family circumstances. These sessions last about 60 to 75 minutes. Sessions may be more frequent or extend beyond 12 months based on need. There are seven major program components:

- (1) The clinical team starts by engaging and building trust with the family.
- (2) The clinical team then conducts a comprehensive assessment through clinical history, assessment measures, and observations in the home and other primary environments for the child (e.g., early care and education).
- (3) The clinical team and family co-develop a plan of care that is informed by the assessment and used to guide program components 4 through 7.
- (4) The mental health clinician delivers a trauma-informed treatment, Child-Parent Psychotherapy, to the caregiver(s) and child to strengthen the parent-child relationship and increase the social-emotional well-being of both child and caregiver.
- (5) The clinical team promotes self-regulation and executive functioning capacity by mentoring caregiver(s) on how to focus their attention, plan, organize, and problem-solve.
- (6) If children are in early care and education environments, the mental health clinician consults with their teachers and caregiver(s) to enhance their understandings of the child's behavior and to coordinate efforts with the home intervention.
- (7) The care coordinator works to immediately stabilize the family and connects family members to community-based services to decrease stressors and promote healthy development, as identified in the plan of care. Through the use of pre and post-assessments, outcomes would be measured in Child Safety (Child welfare administrative reports), Child well-being (Behavioral and emotional functioning, Cognitive functions and abilities), and Adult well-being (Parent/Caregiver mental or emotional health, family functioning). Data tracking will depend on the organization providing the service. "

"Sensory spaces for children

For many children with behavioral health diagnoses, including ADHD, anxiety disorders, autism spectrum disorders, among others, sensory strategies can be helpful for self-regulation. Many therapy offices have sensory tools and spaces available for the children they work with, but it would be helpful to expand these types of sensory tools and spaces in behavioral health settings as well as to consider making them available in other settings like school classrooms, pediatrician offices, among other settings. Examples of equipment include suspended equipment, kinetic sand, trampoline, dim lighting, etc. There already exist options for mobile multi-sensory carts. This would give real time access to tools to help children feel success and mastery managing overwhelming situations. Outcomes could be measured by assessing if there is a decreased need or a more intensive intervention (more intensive therapy, medication management).

"Co-location of services

It is known that behavioral health problems in children are often linked to caregiver mental health concerns, such as depression and substance use disorders. However, it can be very challenging logistically for many of the families we serve to access important behavioral health services for themselves in addition to for their children, and often caregivers will not pursue treatment for themselves and just focus on accessing treatment for their children. Co-location of adult mental health services (including individual therapy, group therapy) with child behavioral health services, including children & youth of all ages (0-21 years), can

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	<p>help families better access treatment for themselves in addition to for their children, which research has shown is so important for their children's success. This could be measured by looking for improvement in linkage to services and symptom outcomes. <i>(ECMH Subcommittee Collaborative Proposals #1-4)</i></p>
Education	<p><u>"EDUCATION/DIVERSITY"</u></p> <p>Implementation of Youth Peer to Peer Counseling Program in High Schools (and ideally in Middle Schools). The template for Program would be similar to MCHS Peer Counseling Program (Poway School District).</p> <p><u>Purpose of Proposal</u></p> <p><u>Overview:</u> Today's students are dealing with the aftereffects of isolation due to COVID-19 & online schooling as well as regular school-based anxiety relating to studies, making friends & fitting in.</p> <p><u>Target Population:</u> Students</p> <p><u>Concept:</u> The Youth Peer to Peer Counseling Program would embody a diverse, inclusive, approachable group of students that support their fellow students in stress management, conflict resolution, active listening, building healthy relationships & improved communication skills. This program educates student volunteers and allows struggling students to talk about their concerns to the people they want to talk & listen to the most - their friends.</p> <p><u>Types of Services/Roles:</u> Volunteer Students Teacher/Administration Supervision & Program Education Role *** Majority of Implementation Expense - Education of Advisors and then their Volunteer Students</p> <p><u>Types of Evaluation:</u> School Attendance, Suicides + Student/Parent Self Reporting of Feelings of Well-Being, Quality of Relationships with Peers & Adults, Management of Day-to-Day Stressors, Risk Behaviors, Engagement in Home, School and Community" <i>(Debbie Dennison/Christine Frye)</i></p>

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One Time Investment to Support Children, Youth and Families

CYF Council Priorities/Recommendations Discussion



<p>Diversity, Equity, and Inclusion</p>	<p>“Stipends or scholarships to increase the number of new master’s level clinicians who will commit to work in CYF SOC programs; additional focus on recruiting students who represent diverse populations and bilingual capacity to meet the needs of the target populations.” (Cheryl Rode)</p> <p>“Research indicates that people benefit from being in services with people whose cultures are similar to theirs which indicates a need to diversify the workforce through greater recruitment efforts; in addition to recruiting for more diversity, training that improves cultural humility and reflective capacity would allow for more effective work with diverse populations.</p> <ul style="list-style-type: none"> • Consider increasing reimbursement for bilingual staff and paying differential for <u>bicultural staff</u> that represent the population served regardless of language capabilities (considering one-time funds, possibly sign on bonuses to flood the system with qualified bilingual/bicultural staff) • Multicultural supervision training across the system • Supervision/consultation/mentorship opportunities provided to agencies by diverse staff/clinicians (ie: facilitated affinity groups) • Recruitment of peer supports that represent the community <p>Outreach programs to high schools from behavioral health staff to encourage diverse students to consider health careers – assistance with scholarships – internship opportunities” (Aisha Pope)</p> <p><u>“Address Equity</u></p> <p>Black and Indigenous families are disproportionately affected not just by the pandemic, but also by historical inequities and discriminatory policies and practices in public sectors, including the housing and child welfare sectors. Black families are 5.85 times more likely to be homeless and 2.57 times more likely to be involved in the child welfare system when compared to families of other races. Similarly, Indigenous families are 3.54 times more likely to be involved in the child welfare system and 2.4 times more likely to be homeless. To shift this paradigm, collaboration must focus on implicit biases in budgetary, programmatic, and policy decisions within and across agencies and programs serving children, youth and families, including programs administered by HHSA. As an initial step, persons with lived experience must be included in the development and implementation of housing, behavioral health, child welfare, public health and other programs and services. Using race explicit data at the jurisdictional level to better understand and address racial disparities can be used to develop concrete actions to advance racial equity in the development and delivery of housing and services. ARPA funds can provide the necessary funding to develop the infrastructure to meaningfully advance racial equity including hiring and including children, youth and families with lived experiences and expertise. Consider families that have experiences across HHSA programs such as those with histories related to child welfare services, mental health, substance use, supportive housing or other housing programs, public benefits programs, etc. Build out an infrastructure such as a division or office of family and youth voice within HHSA. Hire families and youth with lived experiences as benefits navigators, housing navigators, peer supports, parent partners, facilitators, direct service providers, trainings, etc.” (Andrew Johnson)</p>
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American Rescue Plan Act of 2021 (ARPA)
One Time Investment to Support Children, Youth and Families
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Infrastructure	<p><u>“Create a Universal Housing Screening</u> Children and youth who have a reliable place to call home spend fewer days in foster care, experience a reduction in subsequent abuse and neglect cases, and increase their school attendance. Affordable housing with support services that is tailored to the specific needs of families is a proven solution for keeping families together. Working with housing partners to establish a housing screening process by which families can be readily identified and referred to housing and support services can be established and has utility beyond prioritizing ARPA resources. Institutionalizing this process within and across the county agencies and programs serving children, youth and families will prevent housing crises before they happen and create a housing and support referral system for families identified as at risk for housing instability, including those not connected to, or eligible to access programs coordinated through the Regional Task Force for the Homeless.” <i>(Andrew Johnson)</i></p>
Workforce Development	<p>“Stipends or scholarships to increase the number of new master’s level clinicians who will commit to work in CYF SOC programs; additional focus on recruiting students who represent diverse populations and bilingual capacity to meet the needs of the target populations.” <i>(Cheryl Rode)</i></p>
Direct Service	<p><u>“Substance Use Disorder (SUD) Treatment/Recovery</u> There is a lack of available and appropriate SUD treatment for families with children in San Diego County. Utilize ARPA to expand capacity and options within a continuum of SUD treatment/services for families with children thereby prevent unnecessary separation of children from their parent families impacted by parental SUD and associated risk of, or deeper penetration into child welfare services. Create SUD residential/inpatient treatment for parents together with their children, to include single mothers, single fathers, as well as two parent household where both parents are ready to engage in treatment. Consider opportunities to expand the treatment continuum through increasing alternatives to inpatient treatment such as in-home treatment Medication Assisted Therapy. For families without safe and stable housing, leverage APRA and other housing resources available in the county to create a stable home for treatment services to be provided within. Consider other services gaps that exist for these families as they navigate recovery and work to stabilize in and maintain housing.” <i>(Andrew Johnson)</i></p>
General Ideas	<p><u>“Coordinate Amongst Systems</u> As many as 30% of children in foster care are primarily there due to lack of stable housing. Families who are unstably housed and also have persistent co-occurring challenges with chronic health conditions, mental illness and/or substance abuse are at greatest risk of being involved in the child welfare system. While child welfare services are intended to be short-term interventions, permanent, affordable housing that includes access to on-going community-based services for families can make the difference in family stability and well-being over time. Coordinating with housing partners to streamline rental assistance and subsidies, case management, and evidence-based services available to families will help to keep families together or reunify them more quickly. In the absence of already established housing partnership and strategies for assessing and addressing housing needs of families at risk of or involved with child welfare, ARPA funds can provide the necessary funding to develop the infrastructure to do so.” <i>(Andrew Johnson)</i></p>

Webinar: Neonatal Abstinence Syndrome

Trainer: Shelly Virva, LCSW, FNAP

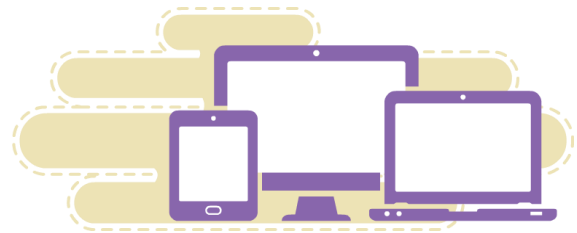
BHE0131

Course Description

Neonatal abstinence syndrome (NAS) is a group of conditions resulting from the sudden discontinuation of fetal exposure to substances that were used by the mother during pregnancy. Most babies with NAS get treatment in the hospital after birth and most babies who get treatment get better in a few days or weeks. However, NAS may lead to long-term health and development problems, including hearing and vision problems and problems with learning and behavior. This 1 hour webinar will include a detailed overview about NAS and appropriate care of and intervention for the infant and family, including developmental and child health outcomes, screening, non-pharmacologic and pharmacologic treatment, evidence-based treatment for women with opioid addiction, and strategies for working with families challenged by addiction.

Audience

All SUD counselors, case managers, therapists, and other direct service providers working within the Children Youth and Families Behavioral Health System of Care.



Date/Time

June 24, 2021
 10:00 am to 11:00 am

Learning Objectives

Upon completion of this training participants will be able to:

- List the characteristics of Neonatal Abstinence Syndrome and screening methods
- List appropriate interventions for infants or at-risk for Neonatal Abstinence Syndrome
- Describe core features of evidence-based treatment for women with opioid addiction
- Describe strategies for working with families challenged by addiction

[Click Here](#) to log into the LMS and Register

Registration: If you already have an account, you may search for the course by name or course code. If you do not have an account in the LMS you will need to open one by [clicking here](#). Email RIHS@sdsu.edu if you have any questions. This training is FREE of charge to BHS County employees and contractors.

Continuing Education: This course meets the qualifications for 1 hours of continuing education credit for LMFTs, LCSWs, LPCCs and/or LEPs as required by the California Board of Behavioral Sciences. The Academy for Professional Excellence is approved by the California Association of Marriage and Family Therapists to sponsor continuing education for LMFTs, LCSWs, LPCCs and LEPs, Provider #91928. The Academy for Professional Excellence is approved by the California Board of Registered Nursing, Provider # BRN CEP10014; CCAPP-EI, Provider # 1S-98-38-98-0822, and CAADE Provider # CP40 906 CH 0323 for 1 contact hours/CEHs. The Academy for Professional Excellence is approved by the American Psychological Association to sponsor continuing education for psychologists. The Academy for Professional Excellence maintains responsibility for this program and its content. CE certificates will be available for download 5 business days after course completion. Click here for information on how to [obtain CE Certificates](#). Click here for the [CE Grievance Procedure](#).

Children, Youth and Families (CYF) Behavioral Health System of Care Council

Council Member Orientation Virtual Event

Monday, July 12, 2021
9:00 – 10:30 a.m.

“All are welcome to attend this informative special session”

New CYF Council members, alternates and meeting attendees are encouraged to participate

This orientation is to ensure that all Sector representatives and alternates appointed by the Behavioral Health Services Director acquire the necessary tools to become informed and effective Council members

Zoom Meeting Information

Register in Advance for this meeting:

<https://zoom.us/meeting/register/tJAodumqqjIjGdTaQiCBhP5HrdXFAK2av-UW>

After registering, you will receive a confirmation email containing information about joining the meeting